

#### ON THE FOLLOWING MEASURE:

H.B. NO. 321, H.D. 1, RELATING TO MEDICAL MARIJUANA.

**BEFORE THE:** 

HOUSE COMMITTEE ON FINANCE

**DATE:** Friday, February 27, 2015 **TIME:** 3:00 p.m.

**LOCATION:** State Capitol, Room 308

TESTIFIER(S): Russell A. Suzuki, Attorney General, or

Jill T. Nagamine, Deputy Attorney General

### Chair Luke and Members of the Committee:

The Department of the Attorney General is aware of several bills that have been introduced this session to establish a means of access to medical marijuana for qualifying patients and is studying them all to determine which might be the best legal vehicle. We raise the following concerns with this bill.

This bill would (1) create a regulated statewide dispensary system for medical marijuana to assist qualifying patients to gain access to medical marijuana and related products, (2) prohibit the counties from zoning against medical marijuana production centers or dispensaries, (3) establish a sub-account in the medical marijuana registry special fund for moneys derived from licensing fees, (4) create legal protections for owners, employees, and persons in the vicinity of medical marijuana production centers and dispensaries, and (5) appropriate general funds as start-up moneys for the regulated statewide dispensary system.

# **Concerns with the number of dispensary and production center licenses:**

Proposed new section 321-B(c), Hawaii Revised Statutes (HRS), at page 4, line 11, through page 6, line 8, would set a minimum number of dispensary licenses to be offered by the Department of Health (DOH) at twenty-six. Setting a minimum number prejudges the need for dispensaries without knowing who would use them or what the actual need would be. We recommend that the Legislature consider allowing the DOH to determine the appropriate number of dispensaries based on information gathered as it collects data from the first dispensaries and from qualifying patients.

Proposed new section 321-C(d) and (e) at page 8, lines 3-11, charges the DOH with determining the appropriate number of production centers, but also requires the DOH to offer a minimum number of production center licenses by a date certain. Setting a minimum number prejudges the production needs without the benefit of knowing how much medical marijuana will be needed to supply the actual demand. Also, as with dispensaries, the DOH cannot control the number of qualified applications it would receive. We recommend that the Legislature consider requiring the DOH's determination of the number of production centers to be based on information gathered as it collects data from the dispensaries, patients, and the first licensed production centers.

### **Concerns with inter-island travel:**

Proposed new section 321-B(c)(4), at page 5, line 15, through page 6, line 8, includes a requirement that the DOH allow an owner or employee of a dispensary to deliver medical marijuana products inter-island. This essentially mandates a state agency to "permit" the violation of a federal law ranging from simple possession (21 USC §844(a)) to possession on board vessels (21 USC §955). While certain protections and defenses may be available on state land and within the boundaries of Hawaiian waters, chapter 329, HRS, would not protect against federal laws within an exclusive federal or international jurisdiction. Additionally, even if the DOH could permit inter-island travel, this paragraph gives no criteria for "good cause to deny the petition" (page 6, line 8) for those situations where the DOH disagrees that there is a need or where the DOH does not think there is an adequate security arrangement for the secure delivery of the products to their intended recipients. Requiring the DOH to grant the petition within sixty days (page 6, lines 6-8) effectively institutes a default approval process that would be a problem if DOH receives a high volume of applications at once, which is foreseeable before there are dispensary locations statewide.

The same legal problems apply to the inter-island travel proposed at page 14, line 18, through page 15, line 13.

### **Concerns with security requirements and law enforcement:**

(1) Unauthorized entry. While proposed new section 321-H(4)(B)(i), at page 14, lines 8-11, would require the DOH to adopt a rule to require patients or caregivers to show their identification upon entering the premises, from the standpoint of protecting minors and

preventing unauthorized persons from obtaining marijuana, we recommend that this restriction be made stronger by including wording in the proposed statute that would make it illegal for unauthorized persons to enter dispensaries or production centers and would also make it illegal for licensed dispensaries or production centers to allow unauthorized person on their premises. Presenting identification is insufficient. There needs to be a strong penalty to deter violations. We recommend a standard of strict criminal liability both for offending unauthorized persons and for offending licensees. We urge these protections in order to protect children and to prevent the unauthorized diversion of marijuana. One suggestion to address this would be to add wording in section 5 of the bill at pages 31-32. An additional subsection could be added to the new proposed section of chapter 329 that would make it clear that none of the protections afforded to those persons who are authorized to be on the premises of dispensaries and production centers would apply to any persons who lacked that authority.

- (2) Licensing or employment of felons. Proposed new section 321-H(6), at page 15, line 14, through page 16, line 2, allows the DOH to adopt rules that would allow certain felons with convictions relating to marijuana to be licensed or employed by dispensaries and production centers. We strongly discourage allowing that because felons include persons who have a history of knowingly and intentionally violating laws; and it is important to the success of a strong regulatory scheme that we not risk that those persons would again violate laws pertaining to marijuana. We anticipate there will be enough qualified non-felon applicants to meet the need for licensees or employees in dispensaries and production centers.
- (3) Background checks. As part of the standards for operators and owners of production centers and dispensaries, background checks are required, page 15, line 14. We recommend requiring background checks in accordance with section 846-2.7, HRS, and amending section 846-2.7 to specifically include the authority to conduct those checks.
- (4) Law enforcement. Proposed new section 321-H(12), at page 18, lines 4-9, would charge the DOH with enforcing prohibitions against the sale or provision of medical marijuana products to unauthorized persons, but that enforcement ought to remain within the jurisdiction of law enforcement.
- (5) Criminal sanctions. Proposed new section 321-I, at page 18, line 17, through page 19, line 5, enhances the State's ability to prevent activity that would be inconsistent with

federal law enforcement objectives, but we recommend additional prohibitions and criminal sanctions for other activities as well, including theft from a production center or dispensary, trespass at a production center or dispensary, and diversion of products from a production center or dispensary.

# **Protection of counties:**

To avoid any ambiguity, new section 46-4(f), at page 29, lines 8-11, should add additional wording, as follows:

(f) Neither this section nor any other law, county ordinance, or rule shall prohibit the use of land for medical marijuana production centers or dispensaries established and licensed pursuant to part of chapter 321[-], so long as that land is otherwise zoned for agriculture, manufacturing, or retail purposes.

# **Concerns with product safety and quality:**

Section 321-E(c) at page 11, lines 7-11, requires manufacturers to provide product weight and equivalency calculations for manufactured marijuana products. We recommend this be guided by standards if there are any available, or if none are available, to allow the DOH to develop standards as information becomes available. This could be clarified by making subsection (c) subject to section 321-E(b) at page 11, lines 1-6.

Section 321-F, at page 11, lines 12-21, limits the types of medical marijuana products that can be manufactured and distributed. We recommend allowing the DOH some authority via its rules to modify, define, or further limit these categories with additional product specifications as product information becomes available.

New limits established for quantities of manufactured marijuana products that can be provided to qualifying patients or primary caregivers at page 16, line 15 through page 17, line 6, will not necessarily coincide with an individual patient's adequate supply, as established by section 329-121, HRS. Appropriate limits, not to exceed an adequate supply, need to be established for each qualifying patient by each patient's certifying physician.

### **Concerns with definitions:**

Our general concern with definitions is that the usage of some terms within the bill is not always consistent with the definitions given, and some terms are not defined, but need to be. It is necessary to define additional terms and be consistent to avoid the problems of ambiguity.

"Dispense" needs to be defined, and its definition should include whatever means of providing medical marijuana to qualifying patients and their primary caregivers the legislature intends to allow. Is this limited to sales? What about free samples? Can purchases be returned or exchanged, or are all sales final? Page 16, line 18, references "sell or provide" and a single, well-defined, and consistently used term, such as "dispense," would be clearer.

"Distribute," used at page 11, line 14, needs to be defined for purposes of this part. It is not clear whether it is limited to retail sale or whether it includes some type of transfer from production centers to dispensaries. It is also used at page 31, line 15, and page 32, line 2, in the form of "distribution." If dispense and distribute are intend to be interchangeable for purposes of this measure, then that ought to be specified in a definition. Will it include exchange of funds? Or is it a delivery from a production center to a dispensary?

"Ingestible form," at page 11, line 4, needs to be defined.

"Manufacture," at page 2, lines 12-21, should be clarified. The current definition is not explicit that the definition of "manufacture" excludes growing. We recommend that the legislature add a sentence to this definition that reads: "Manufacture does not include planting, cultivation, growing, or harvesting."

"Manufactured marijuana product," at page 3, lines 3-5, means "any capsule, lozenge, oil, or pill that has been manufactured <u>using</u> marijuana." (Emphasis added.) It is not clear what "using" means in this process. We suggest instead "... manufactured from marijuana."

"Medical marijuana production center," at page 3, lines 12-19, includes the words "cultivated" at line 14 and "manufactured" at line 16. Based on the new definition of "production" at page 4, lines 6-8, a form of that word should be used instead of "cultivated" at line 14 and instead of "manufactured" at line 16. We also recommend some additional language for clarity, and propose the definition to read as follows:

"Medical marijuana production center" or "production center" means a farm or facility operated by a person licensed by the State pursuant to this part where marijuana is [eultivated] produced with the limited and express intent that all of the marijuana or medical marijuana products [manufactured] produced by the medical marijuana production center pursuant to this part be supplied to medical

marijuana dispensaries or other medical marijuana production centers, pursuant to this part and to section 329-122.

"Production," at page 4, lines 6-8, would benefit by the addition of the verb "produce" as a form of the term. It would read: ""Production" or "produce" means . . . . "

# **Concerns with usage of terms:**

Some of the terms, even when consistently defined, are used inconsistently or in an ambiguous manner. We recommend the following adjustments for clarity and consistency.

One of the requirements for a medical marijuana production center, established by section 321-C(d) at page 8, lines 3-9, is that "no single production center shall acquire, cultivate, manufacture, possess, or transport more than one thousand marijuana plants in total at any one time." These functions are inconsistent with the functions listed in the definition of "medical marijuana production center" at page 3, lines 12-19, and with those functions in the definition of "production" at page 4, lines 6-8. We recommend wording that would encompass all of the approved functions but not inadvertently allow others, e.g., "no single production center shall [acquire, cultivate, manufacture, ]possess[, or transport] more than one thousand marijuana plants in total for any reason at any one time."

This same concern applies to wording on page 16, lines 8-11, which references the types of medical marijuana products that production centers and dispensaries are authorized to "grow, manufacture, sell, or provide." To be consistent with the definitions and the approved functions of production centers and dispensaries, page 16, lines 8-11 should be replaced with: "The types of medical marijuana products that production centers and dispensaries shall be authorized to [grow, manufacture, sell, or provide] produce or manufacture pursuant to section 321-F;."

This same concern arises at page 23, lines 4-7, in relation to not prohibiting qualifying patients or primary caregivers from "cultivating or possessing" an adequate supply of medical marijuana. To be consistent and avoid ambiguity, that section should read: "Nothing in this part shall be construed as prohibiting a qualifying patient or primary caregiver from [cultivating or possessing] producing or manufacturing an adequate supply of medical marijuana pursuant to part IX of chapter 329."

Thank you for the opportunity to share our concerns. We respectfully request this Committee to consider our comments.

#### DENNIS "FRESH" ONISHI

Council Member District 3



PHONE: (808) 961-8396 FAX: (808) 961-8912 EMAIL: donishi@co.hawaii.hi.us

# HAWAI'I COUNTY COUNCIL

25 Aupuni Street, Hilo, Hawai'i 96720

February 26, 2015

The Honorable Sylvia Luke, Chair and Members of the House Committee on Finance

Dear Chair Luke, Vice Chair Nishimoto and Committee Members,

Thank you for the opportunity to provide comments on House Bill No. 321 Relating to Medical Marijuana.

The National Association of Counties, Legislative Conference took place earlier this week in Washington, D.C. That is where I had the opportunity to speak with Chairman Charles "Chaz" Tedesco of Adams County, Colorado, Board of Commissioners.

According to Chairman Tedesco, Colorado Counties receive no share of the tax on revenue from marijuana sales. He also mentioned Adams County has seen a rise in their operating costs due to an increase in services provided by emergency personnel and social programs. These are incurred costs that Counties absorb without a choice.

The Denver Department of Safety reports marijuana-related burglaries have increased 32 percent and citations for smoking in public, shot up 245 percent since January 2014. As you can see, the demand for services will increase, which means overall higher costs.

We must take a collective and collaborative approach to this measure. All affected parties must be considered.

Thank you for the opportunity to provide comments on this measure.

Sincerely,

Dennis "Fresh" Onishi

Hawai'i County Council Member

# TESTIMONY OF THE HAWAI'I POLICE DEPARTMENT

# **HOUSE BILL 321, HD1**

#### RELATING TO MEDICAL MARIJUANA

# BEFORE THE COMMITTEE ON FINANCE

DATE: Friday, February 27, 2015

TIME : 3:00 P.M.

PLACE: Conference Room 308

State Capitol

415 South Beretania Street

# PERSON TESTIFYING:

Harry S. Kubojiri

Hawai'i Police Department

County of Hawai'i

(Written Testimony Only)



Harry S. Kubojiri
Police Chief

Paul K. Ferreira
Deputy Police Chief

#### POLICE DEPARTMENT

349 Kapi'olani Street • Hilo, Hawai'i 96720-3998 (808) 935-3311 • Fax (808) 961-2389

February 25, 2015

Representative Sylvia Luke Chair and Committee Members Committee on Finance 415 South Beretania Street, Room 308 Honolulu, Hawai`i 96813

Re: HOUSE BILL 321, HD1 RELATING TO MEDICAL MARIJUANA

Dear Representative Luke:

The Hawai'i Police Department opposes House Bill 321, HD1, as written, with its purpose being to establish a system of medical marijuana dispensaries and production centers.

The Hawai'i Police Department is concerned that this Bill while recognizing there are over 13,000 Medical Marijuana users, appears to assume that all will acquire their Marijuana from dispensaries while at the same time seemingly allowing users to continue to cultivate their Marijuana. There does not seem to a means or desire to ensure users are not going to continue cultivation of their Marijuana while also seeking to purchase Marijuana from a dispensary. This also fails to take into account the December 2014 statistics for Hawai'i Island Medical Marijuana users in which of the 5,415 only 12 were not growing their own Marijuana.

In that this particular Bill is being heard by the Finance Committee, we note that there are several provisions for collecting funds relating to an application as well as annual renewal fees. It is of notable concern that not one dollar of those fees is earmarked for prevention, treatment, or education with respect to medical marijuana users seeking alternate methods of treatment.

In that the dispensary bill will allow up to eight (8) ounces of marijuana over a 30 day period per person, we believe it will lead to severe addiction given that 8 ounces of marijuana equates to 448 marijuana cigarettes. In order to ingest 448 marijuana cigarettes over a 30 day period of time, the user will be smoking approximately 15 marijuana cigarettes per day. We are hard-pressed to imagine how someone utilizing that much marijuana will be able to function in society except in extreme cases where they are homebound and the disease they suffer from is anything other than terminal in nature.

Therefore, if indeed persons are to be allowed that amount of Marijuana, we believe they will become highly dependent upon it and will need treatment and other services.

#### REPRESENTATIVE SYLVIA LUKE

# RE: HOUSE BILL 321, HD1 RELATING TO MEDICAL MARIJUANA

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Further, we also believe that dispensaries and production centers being placed into counties without the counties having the right to deny these facilities (as long as they are in the appropriate zoning and attendant to the other restrictions set forth within this legislation, i.e. not within 750 feet of a school or park), makes it important to provide Law Enforcement with additional funding to deal with an expected increase in social issues surrounding the dispensaries, production centers and an increase in marijuana usage.

This Bill fails to clearly indicate where the transporting of Marijuana originating from the Marijuana production centers by employees should be limited to. In other words, transportation of Marijuana from a production center should be limited to the most direct route possible to a dispensary with no stops in-between.

In regards to the rules governing the medical marijuana dispensaries and production centers, we believe it is imperative that video monitoring and recording of the premises should be required to include the exterior of all entry/exit points and the interior sales areas to include the areas used to conduct the transactions; we further believe a designated DOH employee should have online 24/7 access to view the video monitoring program and that further, a minimum amount of time should be designated in which video surveillance tapes must remain available for viewing.

In regards to criminal background checks for operators and employees of dispensaries and production centers, we believe they should be subject to refresher trainings and re-certifications on an annual basis as well as subject to criminal background checks every 3 years. We further and most strenuously believe that convicted felons of a felony related to marijuana should not be exempted from the rules in this measure. In that these people have already displayed a disdain for the law, to allow them to handle a "Controlled" substance is a portent for disaster.

The Hawai'i Police Department is also concerned as to how the destruction of medical marijuana will be documented and verified. Medical marijuana should be tracked from the point of acquisition to the point of sale or destruction with a strict verification process in place subject to both criminal and civil penalties for failure to abide by appropriate policies and/or procedures.

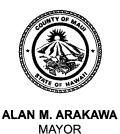
In regards to the required annual financial audit, we believe the auditor to be hired and paid for by the dispensaries and production centers must be an independent auditor who has no financial interest in the dispensaries or production centers.

It is for these reasons, we urge these committees to not approve this legislation.

Thank you for allowing the Hawai'i Police Department to provide comments relating to House Bill 321, HD1.

Sincerely,

HARRY S. KUBÖJIR POLICE CHIEF



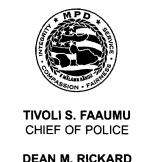
**OUR REFERENCE** 

YOUR REFERENCE

# **POLICE DEPARTMENT**

**COUNTY OF MAUL** 

55 MAHALANI STREET WAILUKU, HAWAII 96793 (808) 244-6400 FAX (808) 244-6411



**DEPUTY CHIEF OF POLICE** 

February 26, 2015

The Honorable Sylvia Luke, Chair and Members of the Committee on Finance House of Representatives State Capitol Honolulu, HI 96813

RE: House Bill No. 321, HD1, RELATING TO MEDICAL MARIJUANA

Dear Chair Luke and Members of the Committee:

The Maui Police Department OPPOSES the passage of H.B. No. 321, HD1.

This bill allows the establishment of medical marijuana dispensaries and production centers; prohibits counties from enacting zoning regulations that discriminate against licensed dispensaries and production centers, and clarifies the right of qualifying patients and primary caregivers to transport medical marijuana.

The Maui Police Department sympathizes with patients approved to use medical marijuana, and understand their issues regarding obtaining it. However, not all of the approximately 14,000 medical marijuana patients have had problems acquiring marijuana for their medical needs. If this bill is passed, it would cause the number of patients to rise exponentially from the approximately 14,000 currently licensed under the present system.

It would cost the Maui Police Department approximately \$221,796.00 per year to train existing officers with the Advanced Roadside Impaired Driving Enforcement (ARIDE) program. It would assist officers in detecting drivers under the influence of marijuana. It would cost the Department approximately \$18,483.00 to train 14 officers per month, by two Police Officer III's and one Sergeant. This includes paying officers to fill the missing shifts of the officers attending training, meals, hotel, and filling missing positions by other officers covering the officers in training shifts. At the rate of training 168 officers in a year, it would take the Department a little over two years to train its 352 sworn officers.

As an addition to the ARIDE training, we would need to select a group of officers that would be good candidates to attend the Drug Recognition Expert (DRE) training. The DRE's would need to be stationed in each district to cover each patrol shift to assist the

The Honorable Sylvia Luke, Chair and Members of the Committee on Finance February 26, 2015
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trained ARIDE officers when an impaired driver is stopped. The DRE could take over for the ARIDE officer's initial investigation. It would cost the Department approximately \$41,152.25 to train five officers in Oahu. It would cost the Department approximately \$493,827 in one year to have 60 DRE's on staff.

We would also have to train officers in the operations and rules regarding dispensaries and grow facilities. We would need to also inform the public of the rules and regulations regarding both grow facilities and the dispensary's locations. The cost involved in this would be high as the entire department, sworn personnel and non-sworn personnel would need training as well as the public.

The Department would also have to prepare citizens about the dangers of crime that could occur near dispensaries and grow facilities. These crimes would be, but are not limited to, Robbery, Theft, Assault, Extortion, Murder, etc.. Because of the product produced and, that marijuana is still illegal federally, these types of operations would have large amounts of cash on hand and would be more enticing to criminals.

Also, as discovered in a recent training in Colorado that some of our officers had attended, the influx of homeless grew with the development of dispensaries and marijuana legalization. As we are all aware of the many issues that homelessness is causing the State of Hawaii, this would only add more strain on our economy to deal with homeless people. The ideal climate of Hawaii with legal means of acquiring marijuana, the homeless population would increase greatly.

With our current system in place, it would be prudent to wait and see what issues arise in Colorado, a State that is dealing with both medical and recreational marijuana use. In a recent interview with Governor John Hickenlooper of Colorado, he stated to other Governors of the States wanting to pass legislation of both medical and recreational marijuana to "wait a couple of years" while Colorado navigates the unknowns, stating, "We're starting from scratch, and we don't have a federal partner because marijuana is still illegal federally." Governor Hickenlooper said that legalizing marijuana was a bad idea.

As previously stated in a recent training with the Colorado Association of Chiefs of Police in January 2015, both law enforcement and people in the industry of selling recreational marijuana both agreed that the present laws governing medical marijuana in Colorado are failing. Colorado did not have the legislative infrastructure to handle the issues arising from medical marijuana and the recreational markets.

A trip to a marijuana growing facility during that same training in Colorado revealed that growers admitted that there is no way that the government can track marijuana plants, processed marijuana, or the funds that come from sales on the gray and black market.

The Honorable Sylvia Luke, Chair and Members of the Committee on Finance February 26, 2015
Page 3

Growers are simply able to remove tags and processed marijuana from one plant, repackage and re-number it to a plant that had no yield or died in the grow process. They use techniques to grow hybrid plants that can yield up to three pounds of marijuana instead of yielding one pound of marijuana as reported. The other two pounds of marijuana is sold in the gray market as it is untraceable and the money unreported.

This bill does not take into account that the Department of Health inspectors will be overwhelmed by the task of inspecting medical marijuana dispensaries and marijuana producers. As a clear example, the Department of Health food inspectors cannot even inspect all of the eateries on every island. How can we expect the Department of Health inspectors to regulate the medical marijuana dispensaries and marijuana producers in addition to their present duties? The State of Colorado had to create a separate regulatory agency to try and handle the industry with approximately 35 inspectors and they still cannot regulate it efficiently.

It is an industry because with the number of projected and required "minimal" amount of dispensaries proposed by this bill, it seems that it is a money making venture rather than an effort to provide services to the medical marijuana patients. Why hasn't the idea of a not-for-profit co-op to produce medical marijuana been thought up? Why are we pushing for profit producers of marijuana, and why are we not requiring dispensaries to produce their own marijuana. This would limit the number of facilities and grows that we have to inspect and control.

With these points that we have set forth today, we feel that there are too many variables that have not been covered by this bill. It is our duty not only to protect the rights of the medical marijuana patients, we have to protect the rights of citizens and visitors that do not use medical marijuana. As always we have to be vigilant against people who are out to exploit the needs of the patients, so they can obtain medical marijuana for recreational use for claiming false medical ailments and for those who are out to steal and sell marijuana for illegal profits.

The Honorable Sylvia Luke, Chair and Members of the Committee on Finance February 26, 2015 Page 4

The Maui Police Department asks that you OPPOSE H.B. No. 321 HD1.

Thank you for the opportunity to testify.

Sincerely,

TIVOLI S. FAAUMU

Chief of Police

# SHOPO



PRESIDENT Tenari R. Ma'afala

VICE PRESIDENT Malcolm Lutu

TREASURER
James "Kimo" Smith

SECRETARY Michael Cusumano

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KAUA'I CHAPTER CHAIR Jesse Guirao

MAUI CHAPTER CHAIR Barry Aoki

Main Office & Honolulu Chapter 1717 Hoe Street Honolulu, Hawai'i 96819-3125 Ph: (808) 847-4676 "84 SHOPO" (800) 590-4676 Toll Free Fax: (808) 841-4818

Hawai'i Chapter Office 688 Kino'ole Street, Room 220 B Hilo, Hawai'i 96720 Ph: (808) 934-8405 Fax: (808) 934-8210

Maui Chapter Office 1887 Wili Pa Loop, Suite #2 Wailuku, Hawai'i 96793 Ph: (808) 242-6129 Fax: (808) 242-9519

Kaua'i Chapter Office 4264 Rice Street, Lihue Mailing Address: P.O. Box 1708 Lihue, Hawai'i 96766 Ph: (808) 246-8911 TO:

The Honorable Sylvia Luke, Chair House Committee on Finance

The Honorable Scott Y. Nishimoto, Vice Chair

House Committee on Finance

Members of the House Committee on Finance

FROM:

Tenari Ma'afala, President

State of Hawaii Organization of Police Officers

DATE:

February 25, 2015

SUBJECT:

Testimony on H.B. No. 321 HD1, Relating to Medical

Marijuana

**HEARING DATE:** 

Friday, February 27, 2015

3:00 p.m. Conference Room 308

H.B. 321 HD1 establishes a regulated statewide dispensary and production system for medical marijuana. The State of Hawaii Organization of Police Officers opposes this bill. Though SHOPO understands that the medical use of marijuana was authorized since 2000, SHOPO also realizes there is much work to be done, and lessons to be learned from the other states that have regulated medical marijuana production and dispensaries.

There are many unanswered concerns that should be carefully addressed prior to any implementation. The House of Representatives, in 2014, wisely created a Medical Marijuana Dispensary System Task Force to identify and propose solutions for the many concerns and issues related to the production and distribution of medical marijuana. (HCR 48) The work of the Task Force is not yet completed.

Issues include how to regulate and enforce: an individual's purchases of medical marijuana in combination with any amounts grown by the individual; quantities of oils and extracts; any destruction of marijuana; and how to effectively delineate enforcement jurisdictions.

These concerns cannot be adequately addressed in the next forty-five days or so of the legislature and thus, we ask that this bill be carried over to the 2016 session, so that work on the issues can be completed. Thank you for this opportunity to testify.



### HB321 HD1 RELATING TO MEDICAL MARIJUANA

- COMMITTEE ON FINANCE: Representative Sylvia Luke, Chair; Representative Scott Nishimoto, Vice Chair
  - Friday, February 27, 2015 at 3:00 p.m.
  - o Conference Room 308

# HSAC COMMENTS ON HB321 HD1 WITH THESE RECOMMENDATIONS:

Good Morning Chair Luke; Vice Chair Nishimoto; and Distinguished Committee Members. My name is Alan Johnson, Chair of the Hawaii Substance Abuse Coalition, an organization of more than thirty treatment and prevention agencies across the State.

The Hawaii Substance Abuse Coalition (HSAC) proposes helpful recommendations to establish licensed medical marijuana dispensaries and production centers for qualifying patients and primary caregivers to transport medical marijuana.

We have the opportunity to do better than we have before when approving those drugs for consumption that may have benefits, but also can be harmful or addictive. How we regulate medical marijuana will set the tone for any possible future legislation.

### **HSAC** proposes these recommendations:

- 1. Restrict advertising.
- 2. Place warning label on product, advertisement and website, etc.
- 3. Increase fees to cover for Regulatory Inspector.
- 4. Increase fees to cover prevention programs for children.
- 5. Increase fees to cover for treatment for marijuana abuse and addiction.
- 6. Encourage other therapeutic forms of THC.

# **Restrict Advertising**

We recommend restrictions to advertising:

- No licensee can advertise marijuana/infused product in any form or through any medium whatsoever within 1,000 ft. of school grounds, playgrounds, child care, public parks, libraries, or game arcades that allows minors to enter.
- Also, you can't advertise on public transit vehicles/shelters or on any publicly owned or operated property.

- ➤ The controls should emulate the restrictions on targeting young people, banning outdoor advertising and product placements that the tobacco industry accepted as part of its settlement with state attorneys general in 1998.
- Retailers are limited to one 1,600 square inch sign bearing their business/trade name.
- They cannot put products on display to the general public such as through window fronts.

Please remember the lesson in the battle between the community vs. the tobacco industry in their advertising's outsize role in creating and sustaining an addiction to nicotine, particularly among teenagers and young adults. Though marijuana is far less addictive than tobacco, states must impose limits on the promotional activities of marijuana to not incur another outsize role.

# Warning Labels

All drugs that have potential harmful side effects must disclose warnings. Here are some suggested warning labels from other states as well as federal agencies:

- Warning: Do not drive and keep out of reach of children.
- ➤ Warning: Growing evidence is showing that marijuana may be particularly harmful for young people: It may cause long-term or even permanent impairment in cognitive ability and intelligence when used regularly during adolescence, when the brain is still developing.
- ➤ Warning: In some instances, marijuana may trigger acute psychosis or symptoms with other mental illnesses.
- Warning: For medicinal use only
- Warning: Not for resale
- ➤ Give information on potency, expiration dates, and a disclaimer that medical marijuana isn't legal outside Hawaii and hasn't been safety-tested.
- Give information to parents and students about the issues surrounding the use of marijuana.
- Warning: The use of marijuana can lead to abuse and addiction.
- Warning: There is no evidence that the use of marijuana is an effective medical solution for any diagnosed illness. Please consult your physician for recommended care.
- ➤ Warning: Smoking marijuana elevates your heart rate 20-100% for up to 3 hours and increases your risk of heart attack for at least one hour after smoking. The risk may be greater in older individuals or those with cardiac vulnerabilities.
- Warning: The chronic use of marijuana has been linked with mental illness. High doses of marijuana can produce a temporary psychotic reaction (involving hallucinations and paranoia) In some users, and using marijuana can worsen the course of illness in patients with schizophrenia. A series of large studies following users across time also showed a link between marijuana use and later development of psychosis. This relationship was influenced by genetic variables as well as the amount of drug used, drug potency, and the age at which it was first taken—those who start young are at increased risk for later problems. Associations have also been found between marijuana use and other mental health problems, such as depression, anxiety, suicidal thoughts among adolescents, and personality disturbances, including a lack of motivation to engage in typically rewarding activities.

# ASSOCIATION OF HAWAIIAN CIVIC CLUBS

# A RESOLUTION

# STRONGLY SUPPORTS THE ESTABLISHMENT OF A STATEWIDE REGULATED DISPENSARY SYSTEM FOR MEDICAL MARIJUANA PATIENTS AND CAREGIVERS

WHEREAS, marijuana, or cannabis, has played a role in medical treatment for thousands of years across many cultures; and

WHEREAS, medical cannabis (or medical marijuana) refers to the use of cannabis and its constituent cannabinoids, such as tetrahydrocannabinol (THC) and cannabidiol (CBD), as medical therapy to treat disease or alleviate symptoms; and

WHEREAS, Act 228, Session Laws of Hawaii 2000, recognizes the beneficial use of marijuana in treating or alleviating pain or other symptoms associated with certain debilitating illnesses, and recognizes the medical benefits of marijuana; and

WHEREAS, Hawaii's Medical Use of Marijuana Law is silent on how patients can obtain medical marijuana if they or their caregivers are unable to grow their own supplies of medical marijuana; and

WHEREAS, a family in Hawai'i has a five-year old daughter, Maile Jen (called "MJ") suffering from Dravet Syndrome, a rare and catastrophic form of intractable epilepsy that begins in infancy with initial seizures that were most often prolonged events, with development of other seizure types in the second year of MJ's life, and

WHEREAS, MJ's mother reports that MJ was suffering from 1,000 mini seizures a day, and

WHEREAS, five year old MJ's cognitive development and ability to walk and talk are seriously diminished by this disease, and

WHEREAS, this family has tried numerous medical treatments and drugs to reduce the seizures over the five years of MJ's life, and

WHEREAS, administering a tincture of medical marijuana that the family puts in her food has dramatically reduced MJ's seizures to 1-2 a month and enhanced her cognitive abilities, and

WHEREAS, MJ's ohana has minimal (and insufficient) access to the medicine, and

WHEREAS, many of the State's almost 13,000 qualifying patients lack the ability to grow their own supply of medical marijuana due to a number of factors, including disability, limited space to grow medical marijuana, and an inadequate supply of medical marijuana to take care of their medical needs; and

WHEREAS, a regulated statewide dispensary system for medical marijuana is urgently needed by qualifying patients in the State; and

WHEREAS, 20 states and Washington, D.C., have medical marijuana laws, and 13 of these 20 jurisdictions have an active regulated system of dispensaries; and

WHEREAS, several other states are in the process of implementing laws relating to the establishment of dispensaries for medical marijuana; and

WHEREAS, a regulated statewide dispensary system for medical marijuana will enable qualifying patients to obtain an inspected, safe supply of medical cannabis that is labeled as to the composition, strain, and strength of the cannabis to be most helpful to each patient's condition; and

WHEREAS, in response to Act 29, First Special Session Laws of Hawaii 2009, the Legislative Reference Bureau published a report entitled, "Access, Distribution, and Security Components of State Medical Marijuana Programs," which discussed the policies and procedures for access, distribution, security, and other relevant issues related to the medical use of marijuana in all states that had a medical marijuana program; and

WHEREAS, establishment of a tightly regulated statewide dispensary system was the number one recommendation of the 2010 Medical Marijuana Working Group; and

WHEREAS, the transfer of Hawaii's Medical Marijuana Program from the Department of Public Safety to the Department of Health in 2015 is an acknowledgement by the Legislature that medical marijuana use is rightly a public health issue; and

WHEREAS, the 2014 Hawai'i Legislature passed HCR 48 establishing a "Task Force to Develop Recommendations for the Establishment of a Regulated Statewide Dispensary System for Medical Marijuana" that is currently meeting; and

WHEREAS, the Task Force has 20 members including the Attorney General, or the Attorney; the Director of Health; the Director of Public Safety; the Director of Taxation; the Director of Commerce and Consumer Affairs; the Director of the Public Policy Center; the Prosecuting Attorney of the City and County of Honolulu; a police chief chosen by the Law Enforcement Coalition; the Chairperson of the Senate Committee on Health; the Chairperson of the House Committee on Health; state senator who is selected by the Senate President to serve on the Task Force; a state representative who is selected by the Speaker of the House of Representatives;

representative from the University of Hawaii College of Tropical Agriculture and Human Resources; a representative of the Drug Policy Forum of Hawaii; a physician participating in Hawaii's Medical Marijuana Program; 2 participants in Hawaii's Medical Marijuana Program, one of whom is a patient who is over the age of 18, and one of whom is a parent or guardian of a patient who is under the age of ten; a caregiver participating in Hawaii's Medical Marijuana Program; a representative from the American Civil Liberties Union of Hawai'i; a representative from the Hawaii Medical Association; and a representative from the Coalition for a Drug-Free Hawaii; and

WHEREAS, the Task Force has formed a Policy Subcommittee that submitted its first report to the Task Force on August 12, 2014 with their recommendations and discussion on four main policy issues: 1) Appropriate number of dispensaries statewide; 2) Appropriate location of dispensaries; 3) Structure of dispensaries (non-profit, for-profit, government-run); 4) Framework for manufacturing; and

WHEREAS, a regulated dispensary system for medical marijuana will align with the spirit and intent of the Medical Use of Marijuana Law: compassion for Hawai'i's suffering patients and the provision of safe, legal, and reliable access to medical marijuana for qualifying patients; and

WHEREAS, there are many models of medical marijuana dispensary systems available in other state jurisdictions, including models that were enacted after the passage of Hawaii's Medical Use of Marijuana Law;

NOW, THEREFORE BE IT RESOLVED by the Association of Hawaiian Civic Clubs at its 55<sup>TH</sup> annual convention at Waikōloa, Hawai'i this 1<sup>st</sup> day of November 2014, that it strongly supports the establishment of a statewide regulated dispensary system for medical marijuana patients and caregivers; and

BE IT FURTHER RESOLVED that a certified copy of this resolution be given to the Governor of Hawaii, State Senate President, State Speaker of the House, and the CEO of the Office of Hawaiian Affairs.



The undersigned hereby certifies that the foregoing Resolution was duly adopted on the 1<sup>st</sup> day of November 2014, at the 55<sup>th</sup> Annual Convention of the Association of Hawaiian Civic Clubs at Waikōloa, South Kohala, Hawai'i.

Soulee L. K.O. Stroud, President

15 14 15

16 17

#### HHS 2014-03 Justice Reinvestment Initiative For Prisoners in He

Whereas. The Department of Public Safety issued a Request for Information (RFI) "to assist the State of Hawer" in learning more about potential approaches to designing, building, maintaining and financing for the new or expanded lacifiles", and

Whereas, in 2010. Hawari's Executive, Legislative and Judicial branches committed to working with the Council of State Governments Justice Center's (herein "Justice Center") nationally recognized criminal justice policy experts to advance Justice Reinvestment in Hawari's and

Whereas. These enalysis provided fiscally-sound, data-driven criminal justice policy recommendations to reduce the overall incarcerated population in order to break the cycle of recidivism and make our communities safer, and

Whereas, The analysis from the Council of State Governments who conducted the research on Hawaii 's criminal justice system never recommended building more correctional facilities, with public funding, or timough public-private partnerships; and

Whereas, According to the Justice Center, the actual and projected prison population is projected to decrease upon enactment of JR policies from 2012-2018 from 6,060 to 5,277 prisoners; and

Whereas, Hawaii 's incarcerated population has been driven by nonviolent drug tawbreakers; and

Whereas. Some correctional facilities are in need of repair and renovation due to lack of maintenance;

Whereas. We do not tear down public schools simply because some renovations are needed or the design is antiquated by "modern" standards, and

Whereas, it is unconscionable to build more prisons when more cost-effective and evidence-based strategies exist that will reduce the incarcerated population, decrease recidivism, and increase public safety, now, therefore, be it

Resolved. That the Democratic Perty of Hawai'i urges the Hawai'i Stare Legislature, Governor, and Chief Justice to fully implement and fund the Justice Reinvestment Initiative before planning to expand bed space for Hawai'i is imparcerated individuals, and be it

Hawai'i Hawai'i Resolved. That the State of Hawari be discouraged from continuing to contract with private prison corporations; and be it

Ordered, That copies of this resolution be transmitted to the Democratic members of the Hawari State Legislature, the Governor of the State of Hawari, the LL Governor of the State of Hawari, State of Hawaris Director of the LL Screening of Health and the members of the Hawari Congressional delegation, and the County Councils.

#### Icon Two

- Barack Obama
- Haweii Legislature
- Wembers

- Young Democrats
- Hawaii County
- Oahu County
- DSCC-Senate
- DCCC-Congress
- Hirono-Sanate

- Maui County
- Kauai County
- Budget For All
- Schatz-Senate
- Gabbard-Congress
- Takai-Congress

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ONLINE TESTIMONY SUBMITTAL
House Committee on Finance
Hearing on Friday, February 27, 2015 @3:00 p.m.
Conference Room #308

DATE:

February 25, 2015

TO:

House Committee on Finance

Rep. Sylvia Luke, Chair

Rep. Scott Nishimoto, Vice Chair

FROM:

Eva Andrade, Executive Director

RE:

Serious Reservations HB 321 HD 1 Relating to Medical Marijuana

Aloha and thank you for the opportunity to provide comments on why we have serious reservations about creating marijuana dispensaries. Hawaii Family Forum is a non-profit, pro-family education organization committed to preserving and strengthening families in Hawaii, representing a network of various Christian Churches and denominations. While we have compassion for people who are ill and are staunch supporters of providing better end of life care for people who are in pain and suffering, we have serious concerns about the expansion of access to medical marijuana and their potential ramifications on the wider community – especially with regards to our keiki.

Medical cannabis dispensing dispensaries continue to be the subject of considerable debate by officials in the places where they have been established. Although we will leave the discussion as to the regulatory functions and applicability to the legal experts, we do offer these five reasons why believe you should hold this bill in committee:

#### 1) Marijuana use, cultivation and dispensing goes against federal law.

Although 23 states (and D.C.) have enacted laws to legalize medical marijuana, (including Hawai'i which legalized it for medicinal use in 2000)<sup>i</sup>, the bottom line remains that <u>it is still illegal to</u> possess, use or distribute marijuana according to federal law.

#### 2) Expanded access to marijuana will hurt our keiki.

Once the bridge is built to widen its access and availability (even under the auspice of compassion), our keiki will be caught in the crossfire. There's a reason marijuana is the most widely used illegal drug in the world – it becomes an addiction. The bottom line is that people can't stop using it once they start<sup>ii</sup>. And once they start, it can become a pathway to other drugs. Even though proponents have tried to dismiss this argument, clinical studies continue to prove otherwise. Medical marijuana use can also hurt a child during his or her mother's pregnancy.<sup>iii</sup>

#### 3) Medical marijuana opens the door for passage of recreational use of marijuana.

The argument for medical marijuana usually is just a way of opening the door to the recreational use of marijuana. When a state creates a dispensary system to help patients get access to medical marijuana, you can expect the next push to be for legalizing recreational marijuana. People of faith may accept the use of drugs for medicinal necessity but we do not understand why we need to flip to the other extreme and treat marijuana like it's a mild, over-the-counter medication.



Even the American Medical Association maintains it position that it [AMA] "shall encourage model legislation that would require placing the following warning on all cannabis products not approved by the U.S. Food and Drug Administration: "Marijuana has a high potential for abuse. It has no scientifically proven, currently accepted medical use for preventing or treating any disease process in the United States." (Res 213, I-14) iv

#### 4) Benefit of smoking marijuana for medical purposes still not proven

The fact remains that there is not enough scientific data to support marijuana's medical benefits. According to the Whitehouse website, Whitehouse.gov<sup>v</sup>, "To date...neither the FDA<sup>vi</sup> nor the Institute of Medicine have found *smoked* marijuana to meet the modern standard for safe or effective medicine for any condition." It's highly unlikely that anyone will be able to prove the substance is entirely safe, because science shows that it is not. As with all drugs, there is always a long list of side effects, warnings, and disclaimers.

#### 5) Hawai'i's roads could become a testing ground for legal limits

Marijuana use affects driving. It is the most prevalent illegal drug detected in impaired drivers, fatally injured drivers and motor vehicle crash victims. It is not difficult to conclude that drivers who test positive for marijuana can cause serious automobile accidents. Five years after establishing a "medical" marijuana program, California saw an increase in fatal crashes. The California Office of Traffic Safety (OTS) completed a survey in 2012 that reported more drivers tested positive for drugs that can impair driving (14%) than did for alcohol (7.3%). Of the drugs, marijuana was most prevalent at 7.4%. VIII According to the Colorado Department of Transportation, drivers testing positive for marijuana doubled between 2006-2010, following an influx of pot shops and significant increases in registered "medical" marijuana users. VIII

Hawaii needs to remain a safe place for families and although we are compassionate towards those who need safe access to medical marijuana, there are too many unanswered questions with regard to the safety of our children. Mahalo for the opportunity to submit our concerns.

Senate Bill 862 passed in 2000, (VOTE IN THE HOUSE: 30 yes-and 20 no (Auwae, Cachola, Halford, Kanoho, Kawakami, Lee, Leong, Marumoto, McDermott, Menor, Meyer, Morihara, Moses, Nakasone, Pendleton, Rath, Stegmaier, Takai, Whalen, Yonamine); (VOTE IN THE SENATE) 15 yes-and 10 no (Buen, Chun, D. Ige, M. Ige, Inouye, Iwase, Kawamoto, Matsuura, Sakamoto, Tam) [ Source: http://www.capitol.hawaii.gov/session2000/status/SB862\_his\_.htm]

http://www.drugabuse.gov/publications/drugfacts/marijuana (02/05/15)

http://www.livescience.com/42853-marijuana-during-pregnancy-baby-brain.html (02/05/15)

AMA Policy: D-95.976 Cannabis - Expanded AMA Advocacy #4

https://petitions.whitehouse.gov/response/what-we-have-say-about-legalizing-marijuana (02/05/15)

<sup>&</sup>quot;A growing number of states have passed voter referenda (or legislative actions) making smoked marijuana available for a variety of medical conditions upon a doctor's recommendation. These measures are inconsistent with efforts to ensure that medications undergo the rigorous scientific scrutiny of the FDA approval process and are proven safe and effective under the standards of the FD&C Act. Accordingly, FDA, as the federal agency responsible for reviewing the safety and efficacy of drugs, DEA as the federal agency charged with enforcing the CSA, and the Office of National Drug Control Policy, as the federal coordinator of drug control policy, do not support the use of smoked marijuana for medical purposes." [Source: http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/2006/ucm108643.htm]

http://unmaskingmarijuana.org/Public Safety.html (February 6, 2015)

viii http://kdvr.com/2014/05/15/study-more-marijuana-positive-drivers-involved-in-fatal-car-accidents-in-colorado/



# CAPITOL CONSULTANTS OF HAWAII, LLP

# 222 South Vineyard Street Suite 401, Honolulu, Hawaii 96813 Office: (808) 531-4551 Fax: (808) 533-4601 Website: www.808cch.com

February 26, 2015

Representative Sylvia Luke, Chair Representative Scott Y. Nishimoto, Vice Chair Committee on Finance State Capitol, Conference Room 308 415 South Beretania Street Honolulu, HI 96813

RE: HB321 HD1, Relating to Medical Marijuana

Dear Chair Luke, Vice Chair Nishimoto and Members of the Committee:

My name is John Radcliffe and I am the President of Capitol Consultants of Hawaii a lobbying company and we represent Pacific Eclipse, a medical marijuana company and we also represent the United Food and Commercial Workers Union in both their interests in seeking legislation to professionalize and enhance the sale, usage, and quality of medical marijuana in Hawaii.

I am also a stage IV liver and colon cancer patient who has undergone 14 three-day bouts of chemotherapy since June. I have suffered through eight trips to the Emergency Room so far, and have had two extended hospital stays numbering 15 days.

So my interest in getting this right is both professional and personal. Yesterday, when I was at Kaiser Hospital to get my chemo pump removed, I casually asked the oncology nurse about how many Kaiser cancer patients were being prescribed medical marijuana for pain relief. She had an exact number. None.

Why not? I asked. "Because it is nonsense. The patients simply find it too hard to get. It makes no sense to try."

Kaiser is a huge HMO system. There are thousands of cancer patients. Medical marijuana works. The Legislature passed Senate Bill 862, legalizing medical marijuana in 2000, 15 years ago. The vote then was 32 to 18 in the House and the Senate barely passed it, 13 to 12. Since then 22 more states have passed better

Representative Sylvia Luke, Chair Representative Scott Y. Nishimoto, Vice Chair Committee on Finance February 26, 2015 Page 2 of 3

legislation. Legislation that works in other states because it is sold professionally under strict oversight of State Departments of Health.

We would like to offer an amendment to the bill under Part I and Part II of the bill to allow medical research on the use of marijuana to tie in with the proposed state dispensary system. The added language is underlined below. It adds the words, "and to facilitate research of medical uses of marijuana" to the purpose of the bill in Part I, and adds a provision in Part II for licensing of qualified research companies that partner with universities to research medical uses of marijuana.

So you should do three things in passing this legislation, finally end the cruel hoax now being perpetrated on patients. They can't realistically get it. Two you need to provide enough dispensaries to meet the need. And three, the bill should facilitate research into medical use of marijuana.

Thank you for the opportunity to testify here today.

Respectfully Submitted,

John H. Radcliffe President



#### The Public Policy Voice for the Roman Catholic Church in the State of Hawaii

**HEARING**: House Committee on FIN, February 27, 2014 @ 3:00 p.m. #308.

**SUBMITTED**: February 25, 2015

**TO**: House Committee on Finance

Rep. Sylvia Luke Rep. Scott Nishimoto

**FROM**: Walter Yoshimitsu, Executive Director

**RE**: Serious Reservations on HB 321 HD1 Relating to Medical Marijuana

If passed, this bill allegedly "fixes" the problem of medical marijuana distribution and the need for dispensaries and/or regulation. We understand that medicinal marijuana is already legal in the State of Hawaii.; however, we maintain that promoting the use of marijuana (even for medical reasons) will translate for many, especially young people, as permissiveness, with little or no consideration of its ultimate effect on one's body. According to the American Medical Association, marijuana is considered a "dangerous drug" and a "powerful intoxicant" that harms one's mental, physical, academic, and spiritual well-being, promotes irresponsible sexual behavior, encourages disrespect for traditional values, and threatens Hawaii's youth. This is not what we want for Hawai'i's keiki.

At the federal level, marijuana remains classified as a Schedule I substance under the Controlled Substances Act, where Schedule I substances are considered to have a high potential for dependency, making distribution of marijuana a federal offense.

Many prescribing physicians for medicinal use of marijuana are arbitrary as to what counts as an authentic medical need so there is no real way for this legislature to make a truly informed decision. Even the American Medical Association's 527-member House of Delegates decided during its interim meeting in 2013 (National Harbor, Md.), to retain the long-standing position that "cannabis is a dangerous drug and as such is a public health concern."

Long-term health effects of chronic use, and marijuana's role as a gateway to the use of other illegal drugs, are serious issues surrounding its use and decriminalization. The Catholic Church cares too much about the family to support this endeavor. Priority legislation should include efforts that strengthen and promote the family, not provide tools to ultimately destroy it.

The Catechism offers useful guidance: "The use of drugs inflicts very grave damage on human health and life" (no. 2291). In 2001, the Vatican's Pontifical Council for Health Care Ministry issued a pastoral handbook entitled "Church, Drugs, and Drug Addiction." It extols the virtue of temperance which "disposes us to avoid every kind of excess: the abuse of food, alcohol, tobacco, or medicine" (no. 2290).

<u>Our reservations are strong enough that we feel you should hold this bill in committee</u>. Mahalo for the opportunity to submit these comments.

# COMMUNITY ALLIANCE ON PRISONS

# P.O. Box 37158, Honolulu, HI 96837-0158

Phone/E-Mail: (808) 927-1214 / kat.caphi@gmail.com



#### **COMMITTEE ON FINANCE**

Rep. Sylvia Luke, Chair Rep. Scott Nishimoto, Vice Chair Friday, February 27, 2015 3:00 p.m. Room 308

STRONG SUPPORT for HB 321 HD1 - MEDICAL MARIJUANA DISPENSARIES

Aloha Chair Luke, Vice Chair Nishimoto and Members of the Committee!

My name is Kat Brady and I am the Coordinator of Community Alliance on Prisons, a community initiative promoting smart justice policies for almost two decades. This testimony is respectfully offered on behalf of the 5,600 Hawai`i individuals living behind bars, always mindful that more than 1,600, and soon to be rising number of Hawai`i individuals who are serving their sentences abroad, thousands of miles away from their loved ones, their homes and, for the disproportionate number of incarcerated Native Hawaiians, far from their ancestral lands.

HB 321 establishes a system of medical marijuana dispensaries and production centers; prohibits counties from enacting zoning regulations that discriminate against licensed dispensaries and production centers; and clarifies the right of qualifying patients and primary caregivers to transport medical marijuana.

Community Alliance on Prisons is in strong support of this measure. Hawai`i sick and dying patients have waited 14 years for a system where they could purchase the strain of cannabis that would relieve their suffering.

On behalf of Community Alliance on Prisons, I attended all of the task force meetings and some of the committee meetings to which the community was invited. I personally visited two dispensaries in California, one in a rural setting and the other in a densely populated urban area to see how they operate, how they interact with law enforcement, and how they sourced the product and tested it for purity managed. I was really impressed by the knowledgeable people who worked at the dispensaries and then toured a cultivation center to observe how they tracked the plants and developed the different strains to treat specific ailments.

The Task Force held statewide meetings and the Maui News<sup>1</sup> reported:

<sup>&</sup>lt;sup>1</sup> Maui medical marijuana users say the program has problems, By Associated Press, Feb 05, 2015. http://www.staradvertiser.com/news/breaking/20150205\_Maui\_medical\_marijuana\_users\_say\_the\_program\_has\_problems.html?id=291013501

Kihei resident Janine Ehlis said marijuana is so expensive in Hawaii she tried to get it mailed to her from the mainland so she could treat her asbestos cancer. She was unsuccessful.

"Trying to get medical marijuana is pretty much ridiculous (on Maui)," Ehlis said at the meeting Tuesday. "And the amount you're allowing us to grow is not nearly enough to produce the oil I need."

She implored law enforcement officials to "go after the ice (methamphetamine) dealers and leave the marijuana (users) alone."

The sentiment expressed by Ms. Ehlis is one heard statewide and validated by a 2014 poll showing that 85% of Hawai`i voters support a statewide dispensary system.

# An article that appeared on AlterNet last fall<sup>2</sup> reported:

Scientific revelations are published almost daily in regard to the healing properties of the cannabis. But most of these findings appear solely in obscure, peer-reviewed journals and go largely unnoticed by the major media. Here are five new cannabis-centric studies that warrant mainstream attention.

Marijuana Use Is Associated With Decreased Mortality In TBI Patients <a href="http://medicalxpress.com/news/2014-10-marijuana-death-patients-traumatic-brain.html">http://medicalxpress.com/news/2014-10-marijuana-death-patients-traumatic-brain.html</a>

CBG Administration Halts Cancer Progression http://www.ncbi.nlm.nih.gov/pubmed/25269802

Parkinson's Patients Respond Favorably to Cannabis Therapy http://www.ncbi.nlm.nih.gov/pubmed/24614667

#### Marijuana Use Mitigates Symptoms of Opiate Withdrawal

"[l]ncreased cannabis use was found to be associated with lower severity of [opiate] withdrawal in a subset of the sample with available chart data," authors concluded. "These results suggested a potential role for cannabis in the reduction of withdrawal severity during methadone induction."

#### Inhaled Cannabis Facilitates Disease Remission In Patients With Crohn's Disease

"Our data show that 8-weeks treatment with THC-rich cannabis, but not placebo, was associated with a significant decrease of 100 points in CDAI (Crohn's Disease and activity index) scores." Five of the eleven patients in the study group also reported achieving disease remission (defined as a reduction in patient's CDAI score by more than 150 points). Overall, inhaled cannabis treatment was associated with "no significant side effects."

A statewide dispensary system is long overdue and we respectfully ask the committees to pass this important legislation. Please support our patients.

Mahalo for this opportunity to testify.

<sup>&</sup>lt;sup>2</sup> The Latest Cannabis Science The Mainstream Media Doesn't Want You to Know, Five new cannabis-centric studies that warrant major attention, AlterNet / By Paul Armentano, October 4, 2014 | <a href="http://www.alternet.org/drugs/latest-cannabis-science-mainstream-media-doesnt-want-you-know">http://www.alternet.org/drugs/latest-cannabis-science-mainstream-media-doesnt-want-you-know</a>

## finance1-Kim

From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 6:03 PM

**To:** FINTestimony

**Cc:** hawaiicannabiscare@gmail.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

# **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Hawaii Cannabis Care	Hawaii Cannabis Care	Support	Yes

Comments: We support!! Please help the patients receive there medicine from a safe and legal access point. We need to help patients use alternative medicines. Please support this bill and move forward this year! Mahalo

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov



Hawaii's voice for sensible, compassionate, and just drug policy

#### **COMMITTEE ON FINANCE**

Rep. Sylvia Luke, Chair Rep. Scott Y. Nishimoto, Vice Chair

Friday, February 27, 2015 3:00 P.M.

Conference Room 308
State Capitol
415 South Beretania Street

# Executive Director Rafael Kennedy, Testimony in strong support of HB 321 - Relating to Medical Marijuana

Aloha Chair Luke, Vice Chair Nishimoto and members of the committee. Thank you for your time and consideration in hearing this bill. The Drug Policy Forum has long considered the establishment of a working, well regulated dispensary system for the medical cannabis program to be one of our **top priorities**. Last year, the legislature passed HCR 48, which formed a task force to look at some of the finer grain details of what a dispensary program would look like in Hawaii.

That Task Force did a tremendous amount of work, met for a total of 22 hours of official meeting time (not counting sub-committee meetings) over the course of six months, held two dedicated public input hearings, and heard from a number of subject matter experts in conference calls and in person. Throughout, while we did not agree on every aspect of the issue, there was a broad recognition of the fact that a dispensary system is urgently needed. The Task Force looked closely at questions of security, diversion, and quality control, to ensure that the system recommended would meet patient needs, while at the same time ensuring that public safety is protected through rigorous and proven inventory control systems, security measures, and a dedication to education of patients and the wider

P.O. Box 83 Honolulu, HI 96810 Phone: 808-853-3231 Email: info@dpfhi.org Website: www.dpfhi.org

community. The task force has taken a great many lessons from other states experience implementing these systems, and has **agreed upon a** framework that will work for Hawaii.

This is an urgent need for the state. Hawaii was at the vanguard of this issue in 2000, when it was the first state to pass a medical cannabis law through the state legislature. Now though, we are the last remaining state with a medical marijuana program that has neither operational dispensaries nor a law to create them. This "gap in the law" is urgent, and for the first time, the state has a workable framework to finally address it. Not only this, but the Department of Public Safety, the Department of Taxation, and the Department of Health among many other stakeholders have agreed that the Task Force Recommendations will be a successful program.

One of the many virtues of the approach taken by HB321 is that the bill consistently puts patients first. This bill ensures that patients are safe by requiring laboratory screening for contaminants and for its component cannabinoids. This is something that has been sorely lacking for far too long. Likewise, the bill provides resources for education. This is important for patients who until now have had no one who can help inform them about the differences between strains, and the indications of their particular conditions. It is also important because educating the public about medical cannabis is a hugely important part of insuring that medical cannabis is not used accidentally by unauthorized people or diverted for use by people without a qualifying condition.

Another key part of this bill is that it creates two classes of license, one for dispensaries and one for producers of medical cannabis. This will help ensure that people can **specialize** in the part of the process that they do best. People with skills and knowledge in growing medical cannabis won't need to worry about taking on the role of running a dispensary, and people with the business skills to operate a dispensary won't need to develop the capacity to become growers and processors of medical marijuana. In the HD1, there is a certain amount of confusion about the various deadlines for licensing these entities, such that dispensaries are not allowed to begin operating until a full year after production centers have been licensed. We think this may be an unnecessarily long window for production centers to begin producing, and dispensaries ought to be allowed to open as soon as they are able to after receiving a license.

There are certain areas of concern in the bill for us. One issue that may be of especial interest to the finance committee is the *very* long time frame that is proposed for getting this program up and running. As we have said

in the past, patients have been desperate for dispensaries for a long time, and it must be a priority for the state to fix this issue soon. We understand that the process of drafting administrative rules and building the capacity to run the program is not a trivial matter for the Department of Health that will be taking on a large and important new responsibility. That said, the time-frame proposed in the bill is **simply too long**. To the extent that the legislature can give them the **resources** and **authority** to do this more quickly, we entreat it to do so. The HD1 contains a provision to allow the Department of Health to adopt interim rules, and if this is helpful in getting the system up and running, we support that change.

It is worth noting that the program is designed **not only to be budget-neutral**, recouping the costs of operation through fees, but in fact will **bring in money in G.E.T. revenue**, and is required to **pay back the initial appropriation**. For these reasons, an upfront investment of resources into shortening the implementation time will be more than returned to tax-payers.

We are deeply concerned that the Health Committee report stated a concern as to whether the program would be self sustaining, and we would point out that the fees are already significantly higher than in many other states with comparable dispensary systems. Levying additional taxes beyond the G.E.T. may indeed have the opposite effect, driving up prices in the white market, and making it such that patients are not able to afford to get their medicine at dispensaries, and reducing the amount of revenue that can be collected. While the structure to collect the General Excise Tax already exists, any additional taxes would need significant changes in the Department of Taxation to collect, which would dramatically reduce the efficiency of the medical cannabis program. Thus, we feel that imposing further taxes on a medical program is both unnecessary and impractical.

We are similarly concerned with the limitations that the HD1 places on the types of products that may be produced. We understand the desire to avoid allowing products that could be consumed accidentally, but feel that there is are compelling reasons to offer edible products as long as these aren't in the form of candies and are packaged and labeled in such a way as to prevent diversion. Even if edible products cannot be allowed, there are other products, such as tinctures and ointments, that should be included in the law.

Again, mahalo for your time and consideration in hearing this bill, and other measures to improve the medical cannabis law. Creating dispensaries is an important step that we need to take, let's take it **this year**.

Rafael Kennedy

P.O. Box 83 Honolulu, HI 96810 Phone: 808-853-3231 Email: info@dpfhi.org Website: www.dpfhi.org

# Executive Director The Drug Policy Forum of Hawaii

The Drug Policy Forum of Hawaii works to educate policymakers and the public about effective ways of addressing drug issues in Hawai'i with sensible and humane policies that reduce harm, expand treatment options, and adopt evidence-based practices while optimizing the use of scarce resources.

P.O. Box 83 Honolulu, HI 96810 Phone: 808-853-3231 Email: info@dpfhi.org Website: www.dpfhi.org

#### FIN-Jo

From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 4:54 AM

To: FINTestimony

**Cc:** andreatischler@yahoo.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

# **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Sub	omitted By	Organization	<b>Testifier Position</b>	Present at Hearing
And	rea Tischler	Americans for Safe Access Big Island Chapter	Support	No

Comments: With over 5300 patients on Hawai'i Island the Big Island Chapter of Americans for Safe Access strongly support a medical cannabis dispensary system. Legal access to medical cannabis is the number one priority for patients and caregivers. At the same time revenue from dispensaries can be earmarked to drug prevention education or other worthwhile programs. The medical cannabis program has been in place since 2000, but has not been updated with the exception of the transfer to Public Health. The most urgent need according to medical cannabis patients is the establishment of a legal, safe, and reliable source for their medicine. Law-abiding patients and caregivers want to remain law-abiding but the way the current medical cannabis law is worded, patients and caregivers are forced to turn to the black market or other illegal avenues to obtain the medicine that they have a legal right to use. A recent poll of registered voters in Hawaii found that 78% are in favor of medical cannabis patients having access to a regulated dispensary system so that registered patients have access to their medicine. While some patients and caregivers have the ability to grow cannabis for medical needs, many medical cannabis patients cannot grow their own medicine. Some do not have the skill to grow cannabis; Some are too sick/ill/debilitated to get out of bed, let alone grow cannabis; Some live in areas where it is illegal or against housing rules or do not have the room to grow their medicine (for instance, in federal housing buildings, in condo/apartment buildings, in urban areas, etc); Some patients do not live in secure areas and their plants are subject to theft or vandalism. Dispensaries will also aid patients who do not want to smoke cannabis but would rather use vaporizers or cannabis-infused products but lack the skills or knowledge to make these products in their own home. Medical cannabis patients, caregivers, physicians believe that it is imperative to address this glaring omission in Hawai'i's medical marijuana program. Although current law allows patients to grow their own plants, the law is silent as to where patients should acquire seeds or clones to start their supply. Caregivers are difficult to find and they are currently limited to assisting only one patient. Hawai'i is starting from scratch on the dispensary issue and has the opportunity to do it right. Please make the correct decision by not limiting the number of dispensaries. Each island has different numbers of patients and the logistics a differ. Distances on the Big Island for example are great. Patients should not be forced to drive, assuming they even have a car, for great distance to get to a dispensary. There needs to be a dispensary near where the patient resides no matter how many are needed. Please structure this system so that it works for the patient. Mahalo.

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## finance1-Kim

From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 3:35 PM

**To:** FINTestimony

**Cc:** bacher.robert@gmail.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Robert Bacher	Green Futures	Support	Yes

Comments: Please pass this much needed bill to finally help so many people. This program is fully capable of paying for itself through modest fees and taxes. After implementation, these fees and taxes will create revenues for the state as well.

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#### SUPPORT FOR HR321 HD1 Establishment of Marijuana Dispensaries

Chair Luke, Vice Chair Nishimoto and members of the House Finance Committee. Thank you for this opportunity to provide personal testimony in strong support of HB321 HD1 relating to the establishment of marijuana dispensaries.

My name is Jari Sugano. After spending a year and a half, growing, manufacturing and dispensing cannabis oils which the State of Hawaii allows me to do under Act 228 SLH 2000, I am convinced that the state is putting Hawaii's patients at risk. This observation is in line with the state auditor's, Sunshine Analysis. Regulation of Medical Marijuana Dispensaries which states, "Without regulated dispensaries, patients' health is jeopardized because a product's strength, strain, and lack of contaminants cannot be verified."

Hawaii's medical marijuana program puts new patients at a disadvantage as we lack the years of experience as long time patients and established caregivers. A 1:1 ratio of caregiver to patient also contributes to the problem. As a trained agriculturalists for nearly 20 years, I endured multiple crop production failures and set backs since receiving my daughter's blue card in 2013. Since Hawaii does not allow laboratories to test cannabis without penalty, it is virtually impossible to know what dosage she is on, or any other cannabis user for that matter. Without understanding the compounds in locally grown marijuana products, obtaining effective seizure control is highly improbable.

Our daughter Maile suffers from 5 different seizure types. At the age of 5 she reached the end of the road for traditional epilepsy management due to drug failures with legally prescribed pharmaceuticals such as phenobarbital, mysoline, keppra, topamax, zonegram, stirepentol, clobazam, depakote, klonipin, bromide, clonidine, concerta, abilify, adderal, risperidon, the ketogenic diet, valium, lorazepam, versed, and non FDA approved drugs.

Establishment of dispensaries in Hawaii, based on the HCR48, 21 member, multiagency Task Force recommendations would provide new and existing patients who are looking to obtain cannabis products with timely access. This could greatly enhance the quality of life of patients living with a qualifying medical condition in Hawaii.

I realize that there is no rational way to put those who are fearful of dispensary infiltration or community targeted cannabis marketing at ease about such establishments. Emails that go into our community inflicts fear about dispensaries opening near schools and deliberately tempting our children. I delivered a presentation about our medical cannabis struggles last week at a local public high school to help students with an argumentative topic for their class assignment. A poll conducted by the teacher reflected that approximately 85-90% of participating students felt that could currently access cannabis (not for medical purposes) on the black market today without a single dispensary located within the state. The problem with youth access is not the establishment of dispensaries but rather the existence and ongoing presence of cannabis in our local society in Hawaii.

The state auditor found, "Since there are currently no medical marijuana dispensaries operating within Hawai'i, we contacted medical marijuana program administrators in other states. We did not receive any indication that abuses by dispensaries have occurred."

How do we protect our children from engaging in activities that are not age, socially, or morally appropriate by society at this present time? Increased education.

Despite the addition of safeguards to minimize targeted areas of risk to youth, the concern regarding youth access is highly noted. I ask the House Finance committee to provide additional funding to increase the current bill's DOH dispensary inspectors to help minimize the concern of dispensary diversion. I also ask that additional funds be appropriated for increased educational outreach efforts (more than 1 statewide staff member) as a good faith measure to provide ongoing education to youth in neighboring communities prior to the opening of dispensary businesses. Appropriated funds for educational efforts should go to organizations who are proactive in integrating the science of cannabis into its prevention programs.

We are asking for due process on behalf of Hawaii's medical marijuana patients who have waited patiently for fifteen years and those who have passed away in hopes that this day would one day come. Let's work to put forth a program where no patient has to worry about taking care of themselves and cultivating their medicine at the same time.

Establishment of regulated dispensaries will help to ensure services are in place for patients and their caregiving families at a time when they desperately need them. This may be one of only a few state financially supported programs that may see a return on its original investment.

Thank you for the opportunity to express my strong support of HB321 HD1.

Testimony in support of HB321 relating to medical marijuana

Rep. Sylvia Luke, Chair and Rep. Scott Y. Nishimoto, Vice Chair of Finance Committee,

I am a close friend and co-worker of Mrs Jari Sugano, who quite understandably as a parent of a very sick child, is doing everything in her power to save her child's life and uplift the quality of that precious life. Mrs. Sugano is one of the most sincere, hard-working, law-abiding, selfless, and honest persons I know. She is now not only fighting for her own daughter Maile Kaneshiro but on behalf of all others who can benefit from medical marijuana when no other medications have been effective.

Please consider supporting HR321 for the establishment of marijuana dispensaries to open legal avenues for patients like Maile to access this life-saving medication. Hawaii needs access to regulated dispensaries to provide medical marijuana that is consistent in dosage and of pharmaceutical grade in a timely manner. Patients and caregivers like Mrs Sugano don't have the expertise and facilities to raise plants of pharmaceutical quality in their backyards or the means to run quality control laboratories in their kitchens to make sure the dosages are consistent, and they should not have to. The extracts needed should be legally accessible as any other prescription drug would be.

It's so unfortunate that marijuana just so happens to be abused by recreational users for its other qualities, which has stigmatized the genuinely medicinal uses of the plant that are not associated with "getting high". I appeal to your considerable intelligence to be able to separate the legitimate use from the abuse and not withhold it from those suffering from conditions that will not respond to any other drug therapies available.

Thank you for your consideration and I hope that you join on the side of doing what's right by children like Maile Kaneshiro.

Ruth Niino-DuPonte Rnduponte07@gmail.com To: Chair Luke, Vice Chair Nishimoto and members of the House Finance Committee.

#### HR321 Establishment of marijuana dispensaries

Thank you for this opportunity to provide personal testimony in <u>strong support</u> of HR321 relating to the establishment of marijuana dispensaries.

My name is Vincent Kimura of Honolulu.

Establishment of dispensaries in Hawaii based on the HCR48, Multi-Agency Task Force recommendations would provide patients with timely access to medical grade marijuana products which could greatly benefit the lives of patients like Maile Kaneshiro, as well as other kama'aina living with a qualifying, medical condition in Hawaii.

Task force recommendations addressed many of the concerns brought forth by law enforcement and drug free activists with safeguards which may heighten security and restrict minor access to medical marijuana dispensary & production facilities. These safeguards in combination with a trace back mechanisms may minimize additional risk and public safety concerns regarding unauthorized access and reckless misuse.

Regulated dispensaries will help to ensure services are in place for patients and their caregiving families at a time when they desperately need them. I ask you to embrace the opening session words of House of Representatives' speaker, Joe Souki when he said, ""I am speaking of those who need better access to medical marijuana. Yes, it is legal in Hawai'i. But there is no legal access to it. The time has come to fix this contradiction."

Thank you for the opportunity to express our strong support of HB321.

Best Regards,

Vincent Kimura

From: mailinglist@capitol.hawaii.gov

Sent: Tuesday, February 24, 2015 10:43 PM

To: FINTestimony
Cc: rontthi@gmail.com

\*Submitted testimony for HB321 on Feb 27, 2015 15:00PM\*

# **HB321**

Submitted on: 2/24/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Ronald Taniguchi, Pharm.D.	Individual	Support	No

#### Comments:

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From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 7:07 AM

**To:** FINTestimony

Cc: kusakak001@hawaii.rr.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Diane Kusaka	Individual	Support	No

Comments: Unable to attach testimony - no access to computer; using phone. I SUPPORT HB 321 - Marijuana dispensaries for medical use will allow patients access to the "drug" with regulated/accurate dosages vs. having parents like Jari Sugano guess while she acts as dispensary at home. Her time/energy could be spent being "Mommy" taking care of MJ and the rest of her family's medical, social, financial, etc. needs. Please support marijuana dispensaries - one day, someone you love may benefit from having easier access. There are many in Hawaii who need this now. General public should not fear - this bill is NOT legalizing marijuana for recreational use.

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From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 1:17 PM

**To:** FINTestimony

**Cc:** samitavaoifi@yahoo.com

\*Submitted testimony for HB321 on Feb 27, 2015 15:00PM\*

### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
samita	Individual	Support	No

#### Comments:

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From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 2:35 PM

To: FINTestimony

Cc: johnnanakama@gmail.com

\*Submitted testimony for HB321 on Feb 27, 2015 15:00PM\*

### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Johnna Nakama	Individual	Support	No

#### Comments:

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From: mailinglist@capitol.hawaii.gov

Sent: Tuesday, February 24, 2015 11:42 PM

**To:** FINTestimony

**Cc:** hairbyjodie@gmail.com

\*Submitted testimony for HB321 on Feb 27, 2015 15:00PM\*

#### **HB321**

Submitted on: 2/24/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
jodie Lum	Individual	Support	No

#### Comments:

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From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 1:17 AM

**To:** FINTestimony

Cc: fmencher@hawaii.rr.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Frederick M. Mencher	Individual	Support	No

Comments: Dear Chair Luke, Vice Chair Nishimoto, and Members of the Finance Committee: I am sending this testimony to express my strong support for HB 321 HD1, "Relating to Medical Marijuana," which would establish a system of medical marijuana dispensaries and production centers. This issue affects me because I know a woman whose small child suffers from Dravet's syndrome, which causes frequent and potentially life-threatening epileptic seizures. Standard treatments have failed, and only cannabidiol – a component of marijuana – has proven effective in helping to control her seizures. At present, there is no legal means for her to obtain a secure supply of consistent potency. Regulated dispensaries would satisfy this need, and almost every state that has legalized medical marijuana has also permitted such dispensaries. Patients with a legitimate need for medical marijuana products deserve a safe and legal means of obtaining their medication. Please support HB 321 HD1. Thank you for the opportunity to support this important bill. Sincerely, Frederick Mencher Nuuanu

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

# Testimony on House Bill No. 321

#### Relating to Medical Marijuana

#### Committees on Finance

February 27, 2015

Chair Luke, Vice Chair Nishimoto, and Members of the Committees:

My name is Deashia Yadao and I am a student at the University of Hawaii at Manoa's Myron B. Thompson School of Social Work. The measure that I am testifying on is HB 321 to establish dispensaries where medical marijuana patients will be able to purchase their prescription in a legal and safe way. I am testifying in favor of HB 321 to open more than one dispensary and production centers in the State of Hawai'i for the use of medical marijuana patients.

The key words in establishing dispensaries is 'Medical marijuana.' Medical marijuana is not used for recreation, but used to help medicate many people. The medicinal ingredient in marijuana is called, "Cannabidiol", or better known as CBD1. CBD's medical use has been proven to help patients who suffer from diabetes, cancer, cardiovascular disease, and even epilepsy. The CBD in marijuana can be extracted from the THC in marijuana and does not give patients the feeling of being "stoned" or "high", and it can also counteract the THC in marijuana. Medical marijuana patients use the product to be able to enjoy their lives, and sometimes is the only option for them.

In the case of Maile Kaneshiro, who suffers from epilepsy, has benefitted from the use of cannabis oil. Thinking about Maile Kaneshiro and all the hardships that she has encountered makes me feel that medical marijuana dispensaries should be made available to all medical marijuana patients. Since treatment of medical marijuana, Maile's seizures have lessened. It saddens me to know that although Maile has found treatment, it is still considered "illegal" and can have great consequences if caught with it. If I were a parent of a child who suffers from epilepsy, I would do anything to help my child. I feel that it is not right to keep this great medicine away from people who truly need it.

My aunty who lives in Oregon has benefitted from the dispensaries since their state made it legal. Prior to this, I witnessed my aunty suffer from chronic migraines which caused her to make the decision to leave her job because the pain was so bad throughout the day. Prescription medicine made her feel nauseous and she did not respond to the prescription well. The only

1 www.projectcbd.org

medicine that would help my aunty was marijuana. Now that the dispensaries have been opened, my aunty is able to buy her prescription with knowledge about what is in her medicine. Today, she is working full-time with no migraines and pain. If Hawai'i were to establish dispensaries, imagine how many people who suffer from similar or worse symptoms can be medicated.

As you can see, medical marijuana dispensaries in Hawai'i can help many medical marijuana patients. Why would the state allow people to hold medical marijuana cards if they have no place to purchase their prescription? It is just allowing patients to commit crimes by purchasing their medicine in an illegal way. With the establishment of dispensaries, medical marijuana patients will be able to purchase their medicine legally, and know exactly what is in their medicine. Dispensaries will allow medical marijuana patients to also get away from purchasing marijuana on the streets.

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 24, 2015 9:12 PM

**To:** FINTestimony

**Cc:** ashley@hoomaluhawaii.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

**Attachments:** medical marijuana testimony

# **HB321**

Submitted on: 2/24/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Ashley watts	Individual	Support	No

#### Comments:

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From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 8:35 AM

To: FINTestimony Cc: honu83@aol.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Jerilynn Miyaji	Individual	Support	No

Comments: I humbly ask for your support in passing HB321 to enable the medically ill some form of relief for their suffering.

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From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 11:31 AM

**To:** FINTestimony

Cc: vincent.goldman@hotmail.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Vincent goldman	Individual	Support	No

Comments: I work with special needs children and adults. Some with seizure disorders, some have tried using cbd oils and the and see amazing results. Also having seen that the oil (thc/cbd) has helped my grandmother extend her life long enough to experience her last dream of coming to hawaii.

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From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 7:58 PM

**To:** FINTestimony

Cc: theede@hawaii.rr.com

\*Submitted testimony for HB321 on Feb 27, 2015 15:00PM\*

### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Teri Heede	Individual	Support	No

#### Comments:

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From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 12:16 PM

**To:** FINTestimony

Cc: samkapoi@gmail.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Samuel K. Kapoi	Individual	Support	Yes

Comments: I SUPPORT HB321. I believe Hawai'i can benefit heavily from medical marijuana. From helping patients who are suffering from pain or diseases. And economically from production centers and dispensaries. Mahalo.

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From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 8:45 PM

To: FINTestimony
Cc: mark@solights.com

\*Submitted testimony for HB321 on Feb 27, 2015 15:00PM\*

### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Mark Nelson	Individual	Support	No

#### Comments:

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From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 8:40 PM

**To:** FINTestimony

**Cc:** koonceleah@gmail.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Leah M. Koonce	Individual	Support	No

Comments: I am submitting testimony in support of this bill because a well regulated dispensary system is long overdue. Diversion continues to be brought up as an excuse to not get functioning dispensaries in Hawaii, however, an example of how to have security in place can be found at the University of Mississippi where the federal government grows and distributes medical marijuana to a select few medical marijuana patients. A more well known system can be found in Colorado where I was a resident for a time. While living in Colorado I was a medical marijuana patient and was impressed with the professionalism of the state dispensaries. They were well regulated with a database in place that prevented patients from doctor shopping or obtaining more medicine than was legally allowed. I also got a veterans discount as I am a service connected disabled Navy veteran. I am also a former substance abuse counselor at a Honolulu methadone clinic where the medicine and program was also well regulated. I can use the methadone clinic as an example of how to avoid violating federal air space because we had guest dosing for patients traveling from other states. Meaning, patients could pick up their medicine and not have to worry about being without. With dispensaries on every island it would eliminate the need for traveling with prohibited medicine (on the federal level) because it will be readily available just like other medications. Please support this practical humane bill. Thank You. Leah M Koonce 85-638 Farrington hwy Waianae, Hawaii 96792 (808)561-9521

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 10:15 AM

**To:** FINTestimony

**Cc:** kahakeas@yahoo.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

-	Submitted By	Organization	Testifier Position	Present at Hearing
	kahakea	Individual	Support	No

Comments: Aloha my name is Kahakea and I am in support of the Bill HB321. First off I'd like to say thank you for bringing this bill back up for reconsideration. I feel like most are misinformed of the purpose of this initiative - We are NOT attempting to legalize marijuana for recreational use. We are trying to open a place where patients can obtain clean, tested medical marijuana safely from a non public place. Over a decade ago, the state of Hawaii acknowledged that there is a legitimate demand for medicinal marijuana here in Hawai'i. We are proposing a means to legally supply legitimate patients with their medicine. Only QUALIFIED medicinal marijuana cardholders should be able to go into a dispensary and get the medicine they need. As only those patients diagnosed with a medical condition should be prescribed and provided with the relevant medications to manage their daily health. Medicinal marijuana patients in Hawaii and their ohana, have waited over 14 years to see movement in this direction and we are glad the time is finally here. Please move forward with Bill HB321 to provide patients who need medicinal marijuana now and for the patients who will benefit in the future. Please pass this bill. Until we move forward, we will never understand the true positive impact we can make. As for financial set backs I believe that this program will end up paying for itself in the long run. We don't need big time investors, just help from the community that we already have. Thank you for reading my testimony. Mahalo, Kahakea

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 11:40 AM

To: FINTestimony Cc: juyeda@hawaii.edu

\*Submitted testimony for HB321 on Feb 27, 2015 15:00PM\*

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

500	Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing	
	Jensen Uyeda	Individual	Support	No	

#### Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Jeffrey Cambra EA 250 Ohua Ave #PHB Honolulu, Hi 96815

Chair Luke and committee;

I, Jeff Cambra, would like to testify in Strong Support of HB 321 HD1. I believe it is a good bill that addresses the issue in a just and timely manner. The committees on Health and Judiciary have asked you to consider the possibility of additional taxes to fund this program. I would ask that you keep the current plan for funding in place as it should provide adequate funds for the project.

Assuming that all 26 dispensary licenses and all 30 growing licenses are applied for, that would result in the first year's budget of \$510,000 being covered with an excess of \$70,000. If we also assume that the renewal fee for growing is 150% of the original license fee, as is the proposed amount for dispensary renewal, that would result in annual renewal fees of \$870,000. This should be more than enough to run the program.

I ask that you pass the bill as is to keep the cost as low as possible for the patients that this bill intends to help.

Thank you Jeffrey J Cambra EA

From: mailinglist@capitol.hawaii.gov

**Sent:** Wednesday, February 25, 2015 6:29 PM

**To:** FINTestimony

**Cc:** freedom.prevails@yahoo.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Jack Faessler	Individual	Support	No

Comments: Patients have waited 15 LONG YEARS for legal access to medicine. Please shorten the 2017 timeline ---- waiting two more years to enact this is not feasible. Dispensaries should also be empowered to sell seeds and clones to those patients who want to grow their own medicine genetics/strains.

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#### **TESTIMONY** to

#### House Committee on Finance

# Sylvia Luke Chair Scott Y. Nishimoto Vice Chair

Members: Romy M. Cachola, Ty J.K.Cullen, Lynn DeCoite, Aaron Ling Johanson, Jo Jordon, Jarrrett Keohokalole, Bertrand Kobayashi, Nicole E. Lowen, Gene Ward Richard H. K. Onishi, James Kunane Tokioka, Kyle T. Yamashita, Feki Pouha,

HB 321 Relating to Medical Marijuana; Dispensaries and Production Centers; Appropriation

Friday, February 27, 2015 3:00 PM - State Capitol Conference Room 308

Submitted in **OPPOSITION** by: Fern Mossman, HI 96734 HD 50

Legislates, I OPPOSE the creation of a marijuana dispensary system. Although the bill would only apply to medical users, the overabundance of product will entice and fuel the appetite of recreational users. Marijuana is dangerous. It will negatively affect the general welfare of the people of Hawaii by increasing the available supply, and access HB 321 will adversely impact our communities, our families and especially our vulnerable keiki.

#### Additionally HB 321:

- Does not legislate any oversight of dispensaries or production centers. A single Department of Health employee is not enough to ensure that overproduction does not bleed into our society.
- Dispensaries historically have not protected our families and our children HB321 repeats the same mistakes.
- While it prohibits dispensaries from being located within 500-feet of a public school, this restriction explicitly does not apply to private schools, parochial schools or preschools.
- Places no restrictions on advertising or signage by production centers and dispensaries.
- Creates exceptions to allow convicted felons to work and/or operate dispensaries or production centers.
- Permits marijuana cultivation on state agricultural lands.

<u>Recommendation</u>: I oppose. HB321 With all of these glaring flaws, the last thing they should be doing is fast-tracking bad legislation.

From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 9:07 PM

**To:** FINTestimony

Cc: eublalock@hotmail.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
elizabeth blalock	Individual	Support	No

Comments: Marijuana is a medicine, and is recognized as such by the state of Hawaii. Most of us take medicines to treat symptoms or control disease processes but our medicines are sold in clearly defined preparations and dosages that are FDA approved and regulated. We can take our medicines with relative confidence. We don't have to grow foxglove and make our own digitalis for heart failure or find a willow tree to extract aspirin for a fever. Those who take medical marijuana have been told they must buy the seeds for their medicine illegally, then grow and harvest it, and experiment with the preparations and dosing till they figure out what is best for them. They have no trained experts to turn to, no guidance, no safeguards against mistakes, thievery, contamination. These fellow citizens need and deserve a dispensary system with educated and informed staff who can provide them the guidance, service, and quality assurance we all are accustomed to at our pharmacies.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 10:39 AM

**To:** FINTestimony

Cc: dsugano@hawaii.edu

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
Daniel Sugano	Individual	Support	No

Comments: Chair Luke, Vice Chair Nishimoto and members of the House Finance Committee. Thank you for this opportunity to provide personal testimony in strong support of HB321 HD1 relating to the establishment of marijuana dispensaries. My name is Daniel Sugano of Honolulu. I am the uncle of Maile Kaneshiro, the young girl battling non stop seizures with medical marijuana (MMJ). I have witnessed the amazing effects on her seizure control and self help abilities as a result of MMJ oil. I have also traveled the nation and witnessed how other states handle marijuana for people who have various illnesses. Please consider the establishment of dispensaries in Hawaii to help those with medical conditions live a better life. Thank you for the opportunity to express my strong support of HB321 HD1.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 6:19 PM

**To:** FINTestimony

Cc: dciccone@ymail.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Dana Ciccone	Individual	Support	Yes

Comments: We need this to happen this year!! I support !! Patients néed to have a place to get their medicine. We have waited long enough.. With the caregiver / patient ratio so low, patients need help now. Do the right thing and make this happen. Mahalo

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To: Chair Sylvia Luke and Members of the House Committee on Finance

From: Cheryl Toyofuku, Pearl City, Hawaii

Re: Opposition to HB 321, Relating to Medical Marijuana, Dispensaries & Production

Centers; Appropriation

Hearing: Friday, February 27, 2015 at 3:00 p.m., State Capitol Room 308

As a mother, grandmother, registered nurse, health advocate and concerned citizen of Hawaii, I am in strong opposition to HB321. As a parent and health care provider I sympathize with individuals who suffer greatly, yet I cannot support any system that legislates the use of marijuana - medicinal or recreational.

Although Health Chair Belatti has made changes to this bad bill, there are still many parts of this bill that are highly flawed that jeopardize the wellness of myself, my family and our state of Hawaii.

In particular, I would like to draw your attention to remarks made by the chairs of the Health and Judiciary Committees in their standing committee report:

Your Committees also note that the Medical Marijuana Dispensary System Task Force recommended that medical marijuana dispensaries and production centers be subject to the general excise tax, as well as a licensing fee structure. Your Committees, however, have concerns that the revenues generated may not be sufficient to sustain a regulated system of medical marijuana dispensaries and cultivation centers. Accordingly, your Committees respectfully request that the Committee on Finance also consider whether other financing options, such as additional fee structures or taxing methodologies, are necessary to ensure that regulation of the system of medical marijuana dispensaries and production centers is self-sustaining.

It is clear that the program must be self-sustaining, and it lacks the fiscal resources to achieve this. It is only fair that users of the program should pay into the system to keep it self-sustaining. That amount should be proportional to the volume that a user accesses from the system. As a taxpayer, it is already offensive to pay into a system that I do not utilize. A system to produce and dispense marijuana is very different from public transit or invasive species protection. As a person of faith, I take even greater offense to paying into a system that I morally and ethically object to.

For any sort of fee structure to work, there needs to be a robust reporting and tracking system to ensure that users pay the proper fees into the system, and that dispensaries are assessing the correct fees for the items purchased. This tracking system would have an ancillary enforcement benefit – real-time reporting would prevent individual users from purchasing more than their allotment in the prescribed 15- or 30-day period. This would prevent a user from purchasing their allotment in Kakaako only to drive 20 minutes to Aiea to purchase another allotment based purely on the "honor system" that the current language institutes. HB321 currently lacks any sort of tracking system to this effect.

Finally, financial solvency is jeopardized by the lack of any tracking system for home-grown marijuana. Home growers also benefit from the medical marijuana program and should also have to pay their fair share. Without any enforcement at the home-grown level, there is no way to ensure proper reporting or compliance. Please institute a program of enforcement and/or tracking at this level or do away with home-grown marijuana completely.

While I have moral and ethical objections to the implementation of a system to produce and distribute marijuana, I have a financial interest in this as well. I should not have to pay into a system that I will not use and that I object to morally and ethically. If history is any example, I also expect either the Department of Health or the Legislature to raid general funds that could be used for the education of our keiki to keep a broken dispensary system afloat.

Please address a myriad of other concerns:

- This bill strips counties of their zoning authority. As one who lives more than 750
  feet from a public housing complex, school or playground, the counties could not
  prohibit a dispensary or production center from setting up shop next door to my
  home
- 2. This bill permits production centers on agricultural land a resource that is supposed to be held in the entire public trust. It is not in the best interests of the public to be using our precious agricultural land for production of marijuana. Our future food security and sustainability depends on every bit of farm land we have left.
- 3. Marijuana limits are currently based on usable weight, not based on THC content. There is very little correlation between the usable weight and the THC content of marijuana as it varies from one strain to another. Assessing fees on a "usable weight" basis all but ensures that there will be a huge demand for higher potency strains of marijuana that have very little medicinal value.
- 4. In its current form, HB321 creates another industry for big tobacco companies to move into. They have already done enough damage to the health of our islands and left a legacy of health issues that the tobacco settlement barely makes a dent in. Any system that HB321 legislates should be local controlled and run by individuals who have been a member of our community and have an obligation to their neighbors.

From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 5:44 PM

To: FINTestimony
Cc: thirr33@gmail.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Arvid Tadao Youngquist	Individual	Support	Yes

Comments: Chair and Vice Chair House Finance Committee Right Honorable Members I support HB 321 HD1 co-sponsored by the following State Representatives: SOUKI, BELATTI, BROWER, CREAGAN, EVANS, HASHEM, ING, KOBAYASHI, C. LEE, LUKE, MCKELVEY, MIZUNO, MORIKAWA, NAKASHIMA, NISHIMOTO, RHOADS, SAIKI, SAN BUENAVENTURA, TAKAYAMA, TAKUMI, & THIELEN. Unless the State takes additional affirmative action, much needed medicinal marijuana palliatives will not be available to patients who desperate need it. It is important to keep in mind that Alaska voted by popular ballot initiative to legalize recreational marijuana. If a large State like Alaska with just a fraction of Hawaii population can see their way clear to take that step, it would be a modest step in the right direction to adopt this measure and encourage your colleague in the House as well as across the aisle to also support it. Mahalo for this opportunity to provide testimony in support. Arvid Tadao Yougquist Oahu resident and voter

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 11:42 AM

To: FINTestimony Cc: tawnll@aol.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing	
Todd Takeda	Individual	Oppose	No	

Comments: I am very much concern about the minimum 26 dispendaries that you are stipulating to be available. Where are all these dispesaries going to be located at? Also, the minimum distance from any school (public or private), 500ft is just too close of an easy access to our youth & children. And my question to you is, are you willing to have a dispensary in your district & how are contituents feel about that, they maybe for medical marijuana, bu a dispensary next door to them? Are they OK with that. If we are to make medical marijuana accessible, why not regulate it to be dispensed thru pharmacies, NOT dispensaries! Mahalo for your time!

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

**Sent:** Thursday, February 26, 2015 12:11 PM

To: FINTestimony

Cc: environmental.architect@yahoo.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Susan landry	Individual	Comments Only	No

Comments: HB321 - The following information appears to be incorrect. Line 12 states there are (2) types of Licenses, but Line 16 & Line 17 are exactly the same. Line 12 states - (C) The department shall offer two types of licenses, Line 16 - marijuana plants in total at any one time; or Line 17 - marijuana plants in total at any one time.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 10:11 PM

To: FINTestimony

Cc: ninja01@hawaii.rr.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing	
stuart saito	Individual	Support	No	

Comments: Its time for a change and make it possible for the people in real need who don't bother getting a card because they don't want to waste their time or money for something they have no access to. its time to do the right thing for the people in need.

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From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 7:20 AM

To: FINTestimony

Cc: paulkaneshirosr@yahoo.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing	
Paul Kaneshiro	Individual	Support	No	

Comments: Once upon a time, I was totally against any form or use of marijuana....after gaining more insight of this issue, my position has changed to realize that there are "beneficial" uses in the area of medical marijuana. There are legitimate cases where medical marijuana can greatly help individuals who have no other alternative to relieve the pain and suffering not only to the patient but to their family and friends. I FULLY SUPPORT THE MEDICAL MARIJUANA DISPENSING ESTABLISHMENTS. HOWEVER, I DO NOT SUPPORT THE ISSUE OF RECREATION MARIJUANA.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 11:25 PM

To: FINTestimony

Cc: pamwaki@earthlink.net

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Pamela Waki	Individual	Comments Only	No

Comments: Chair Luke, Vice Chair Nishimoto and members of the House Finance Committee. Thank you for this opportunity to provide personal testimony in strong support of HB321 HD1 relating to the establishment of marijuana dispensaries. Expecting families with medically fragile children like the Kaneshiro's to farm and produce their own medicine is not realistic for many people in Hawaii. Establishment of dispensaries will help to ensure services are in place for patients and their caregiving families at a time when they desperately need them. Thank you for the opportunity to express my STRONG SUPPORT of HB321 HD1. Sincerely, Pamela Waki

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 11:48 AM

To: FINTestimony

Cc: Minoux13@yahoo.com

Subject: \*Submitted testimony for HB321 on Feb 27, 2015 15:00PM\*

# **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	<b>Present at Hearing</b>	
Mercedes Minoux	Individual	Support	No	

#### Comments:

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From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 8:15 AM

To: FINTestimony

Cc: brad@solcleanmaui.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Brad	Individual	Support	No

Comments: I would like to voice my support for HB321. We need safe access for medical marijuana patients, and we need it sooner than 2017. Please figure out a way to make medical dispensary system self-funded. I feel this is possible with reasonable fees and taxes; so as not to take away from other programs which need funding too. This has been accomplished in other states and we can do it here in Hawai'i. Please help to take care of our patients in need. Mahalo

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 8:24 AM

To: FINTestimony

Cc: mattbinder@earthlink.net

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing	
Matt Binder	Individual	Support	No	

Comments: Aloha Committee Members, This bill is long overdue. The task force did excellent work and HB321 follows their recommendations very well. I like everything about the bill except the start date - I think the system could be implemented by the end of 2016. I look forward to the day when the black market in medical marijuana is eradicated. Thank you, Matt Binder Kamuela

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From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 7:44 AM

To: FINTestimony Cc: hiragacs@gmail.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
curt	Individual	Support	No

Comments: hello, i would like to support HB321. It is time for patients to get legal access to this medicine. It has been way too long and we need change! Thank you

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From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 5:39 AM

To: FINTestimony

Cc: MFujioka808@outlook.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
M. Fujioka	Individual	Support	No

Comments: I am writing in strong support of HB321. Given the new research and evidence supporting medical use of marijuana, Hawaii should provide a means for individuals to obtain tested and consistent strains of medical grade marijuana. One myth regarding marijuana is it's potential risks. Yet a recent report published by Scientific Reports compared the potential of death from the 10 drugs and concluded marijuana to be the safest, even when compared to alcohol and cigarettes. Most experts say there has never been a documented overdose death from marijuana use in someone without an underlying condition. Again the latest research and findings continue to support the use of marijuana for chronic medical conditions and debunk existing myths regarding marijuana. Please allow individuals suffering from these conditions to have access to this life saving medication.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 9:51 PM

To: FINTestimony

Cc: georgina808@gmail.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing	
Georgina Mckinley	Individual	Support	No	

Comments: Position: Strong Support for HB321 Nearly fifteen years ago, when the Legislature of the State of Hawaii enacted the Medical Use of Marijuana Law, Hawaii was seen as a very progressive state. The law showed concern and compassion for the people living here whose health might benefit from the use of cannabis. Sadly, for whatever reasons, the promise went largely unfulfilled. Despite the law having great potential, thousands of qualifying patients still, to this day, do not have safe and legal access to this medicine. There is no way to legally obtain the seed one needs to grow the plant. If a patient breaks the law and is somehow able to procure a seed, it's assumed that they have the time, knowledge, ability, and resources needed to tend to and successfully grow the plant for however long it takes to produce usable medicine ... or that they will somehow be able to find, and then convince, another person to do that for them - to become their caregiver. That is not always the case. Those types of caregivers don't advertise on Craigslist. In reality, the current law may inadvertantly be helping to promote and sustain Hawaii's flourishing underground market. Many patients who are medically and legally qualified to possess and use cannabis are forced to purchase their medicine from any available source. It may not be the correct strain to best treat their specific health needs. It may be of inferior quality. It may be priced too high. It may be contaminated with toxins or mold. The circumstances of the (illegal)transaction itself may jeapordize their safety and well-being. Hawaii's nearly 14,000 registered cannabis patients deserve better. Patients deserve safe access to quality, affordable, medicine. This needs to happen as soon as possible, as the wait has been far too long already. This will not happen without your help. This will not happen without a regulated statewide dispensary system. For these reasons, I strongly support HB321. Thank you, for your time and attention to this very important matter and for allowing me this opportunity to provide testimony. Sincerely, Georgina McKinley

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 6:51 AM

To: FINTestimony

Cc: cricketbearbear@hawaiiantel.net

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Karen	Individual	Support	No

Comments: Chairman Luke and vice Chairman Nishimoto and members of the House of Finance committee: Thank you for allowing people to share their strong spot of HB321 to establish marijuana dispensaries. It is unreasonable to expect families with medically fragile children to be able to produce their on medicine. If dispensaries are established, it will ensure services will be in place when they are so desperately needed. So I truly appreciate you taking time to read this because I STRONGLY SUPPORT HB321! Mahalo, Karen

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 9:27 PM

To: FINTestimony Cc: j.bobich@tcu.edu

**Subject:** \*Submitted testimony for HB321 on Feb 27, 2015 15:00PM\*

#### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing	
Joseph A. Bobich	Individual	Support	No	

#### Comments:

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From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 9:59 PM

To: FINTestimony

Cc: joshforde@gmail.com

**Subject:** \*Submitted testimony for HB321 on Feb 27, 2015 15:00PM\*

#### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

	Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Ī	Joshua E. Forde	Individual	Support	No

#### Comments:

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From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 5:15 AM

To: FINTestimony Cc: aiea67@hotmail.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing	
k maile	Individual	Support	No	

Comments: I am writing in strong support to HB321. It is imperative that the State support individuals who require medical marijuana which is cultivated and tested in a safe and consistent manner. For most of these individuals, medical marijuana is their final and only option to treat their condition. Please allow this life saving bill to pass! Thank you.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 11:50 AM

To: FINTestimony

Cc: Irtakeda01@gmail.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Lolita Takeda	Individual	Oppose	No

Comments: Having 26 dispensaries throughout the State is going to be harmful to our Youth & families who do not need the use of marijuana. This will give an easy access to our children & youth, who are already targeted to use & abuse this addictive substance. Research shows that 6 out 8 children who use marijuana, get addicted & there was scientific data that proves a significant decrease in IQ, if marijuana is use at a young age. Please defer this bill, until we find out a way for sure, that our families, youth & children are not put in harms way, as a consequence of marijuana dispensaries. Mahalo for your time & service to our people of Hawaii!

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

# Testimony of **Kylie Matsuda-Lum HB 321 Establishment of Marijuana Dispensaries**

House Committee on Finance Friday, February 27, 2015 3:00pm Conference Room 308

Chair Luke, Vice Chair Nishimoto, and members of the House Committee on Finance, Thank you for this opportunity to provide personal testimony in **Strong Support** of HB321 relating to the establishment of marijuana dispensaries.

My name is Kylie Matsuda-Lum of Kahuku, Oahu.

Establishment of dispensaries in Hawaii based on the HCR48, Multi-Agency Task Force recommendations would provide patients with timely access to medical grade marijuana products which could greatly benefit the lives of patients like Maile Kaneshiro, as well as other kama'aina living with a qualifying, medical condition in Hawaii.

Task force recommendations addressed many of the concerns brought forth by law enforcement and drug free activists with safeguards which may heighten security and restrict minor access to medical marijuana dispensary & production facilities. These safeguards in combination with a trace back mechanisms may minimize additional risk and public safety concerns regarding unauthorized access and reckless misuse.

Regulated dispensaries will help to ensure services are in place for patients and their caregiving families at a time when they desperately need them. I ask you to embrace the opening session words of House of Representatives' speaker, Joe Souki when he said, ""I am speaking of those who need better access to medical marijuana. Yes, it is legal in Hawai'i. But there is no legal access to it. The time has come to fix this contradiction."

Thank you for the opportunity to express our strong support of HB321.

Kylie Matsuda-Lum

### Adina M. Murakami, B.S.W., C.S.A.C. 1759 A Skyline Dr., Honolulu, HI 96817 adinam@hawaii.edu

February 26th, 2015

To: Honorable Representative Joseph Souki, Speaker of the House

Representative Sylvia Luke, Finance Chairperson

Representative Scott Y. Nishimoto, Finance Vice-Chair And members of the House Committee on Finance

From: Adina M. Murakami, C.S.A.C.

RE: HB321, Relating to Medical Marijuana – SUPPORT

Speaker of the House, Chair, Vice-Chair, and members of the House Finance Committee, I am testifying in **strong support** of HB321

Aloha, as a substance abuse counselor I have had the opportunity to service many agencies and work with a wide variety of constituents over the last two decades. In that capacity I have had the privilege to work with individuals who grappled with addiction, and have personally witness numerous achievements in recovery as well as horrific setbacks. I am currently enrolled in the Masters Social Work program at the University of Hawai`i at Mānoa.

- I am honored to work with the Epilepsy Foundation of Hawai'i as a practicum student and have discerned that multiple individuals who are living with epilepsy in Hawai'i would benefit from a medical marijuana dispensary system. Three major organizations have come forward in support of the rescheduling of marijuana Epilepsy Foundation of America, American Academy of Pediatrics and just recently the Surgeon General.
- As a Certified Substance Abuse Counselor in the state of Hawai'i I feel obligated to support testimony which will support the health and well being of our community as a whole. To create a pathway which will support the legal dispensing of medical marijuana would enhance the quality of life for those individuals who have been diagnosed with a disorder which could be effectively treated by medical marijuana.

I currently have no suggested revisions to this bill as it stands.

I strongly support the development of medical marijuana dispensaries in the state of Hawai'i.

Thank you for the opportunity to submit testimony.

Sincerely,

Adina M. Murakami, B.S.W., C.S.A.C.

Dear Chair Luke, Vice Chair Nishimoto and members of the House Finance Committee,

I am in strong support of HB321 HD1 relating to the establishment of marijuana dispensaries. Currently it is so difficult to obtain medical marijuana and this has affected the quality of life for these individuals. Many individuals and families would greatly benefit by having access to medical marijuana with heightened safeguards to help minimize diversion to at risk groups of concern.

I have witnessed how the Kaneshiro's have faced many obstacles to help their daughter MJ. Establishing dispensaries would greatly benefit families like theirs. Please support HB321 HD1!

Respectfully submitted,

Clyde Fukuyama

Rep. Sylvia Luke Committee on Finance

RE: HB 321 HD1

Friday February 27, 2015
3:00 PM Conference Room 308
State Capitol
415 South Beretania Street

#### Aloha,

I am in opposition to HB 321 for the following reasons:

- Marijuana is one of the top two substances being abused by adolescents. I am
  concerned that the existence of medical marijuana dispensaries along with edibles &
  other marijuana by products will increase access to youth. I work with elementary &
  middle school youth & I see the ramifications of marijuana abuse both in and out of the
  school system.
- Marijuana use in adolescence can negatively affect brain development. Marijuana use has been proven to impair learning, memory, motivation, judgment and behavior control. The effects have a profound & damaging effect on an adolescents' prefrontal cortex which has not yet been fully developed.
- The Department of Health will be unable to effectively regulate the amount of marijuana patients possess at any time by allowing both home cultivation & dispensaries as part of the medical marijuana program.

Please take into consideration that HB321 HD1 be deferred for more study & modification.

Mahalo.

Katie

Rep. Sylvia Luke Committee on Finance

HB321, HD1

Friday, February 27, 2015

3:00 p.m., State Capitol Conference Room 308

I am a resident of Ewa Beach and I work with youth, families and communities within the state. I am in opposition to HB321, HD1.

In a community survey done in Ewa Beach and Kapolei, Marijuana is one of the top two substances that are being abused by youth. Consistent marijuana use by adolescents reduces up to 8 IQ points, is linked to schizophrenia because it causes ventricles to become enlarged, reduces the level of serotonin causing depression, psychosis and the list goes on. With the existence of medical marijuana dispensaries and production centers, the accessibility of marijuana to youth will increase. Also, marijuana by-products have concentrated amounts of THC, which could cause an overdose and/or young children to accidentally consume them since their packaging looks very similar to that of the non-marijuana products (i.e. pop tarts vs. poT tarts, etc.). Children and youth could be harmed by a poorly regulated medical marijuana dispensary and production center system due to leakage of smoked and edible marijuana and other by products into the community. The Department of Health will be unable to effectively regulate the amount of marijuana that patients possess at any time by allowing both home cultivation and dispensaries as part of the medical marijuana program. How will the State be able to tax and regulate cash only businesses that include dispensaries, growers, and other vendors?

In conclusion, I am opposed to HB321, HD1 and request that it be deferred for more study and modification.

Thank you,

C. Labuguen

S/H House Finance Committee HR321 HD1 Establishment of Marijuana Dispensaries

Chair Luke, Vice Chair Nishimoto and members of the House Finance Committee. Thank you for this opportunity to provide personal testimony in strong support of HB321 HD1 relating to the establishment of marijuana dispensaries.

My name is Marissa Sugano of Mililani, Oahu. My niece is the 6 year old girl named MJ Kaneshiro who uses cannabis oil to minimize her seizures. We have watched her endure too many seizures in her short life span. We have also seen her make tremendous gains with her use of cannabis oils.

As a parent with a young child myself, I understand the concerns regarding cannabis dispensaries in our neighborhoods. But, as a result of my niece MJ, I also better educated about the misconceptions around cannabis, marijuana, or pakalolo use in Hawaii.

Through exposure to families like the Kaneshiros and others who use cannabis, my daughter is learning the meaning of not giving up. She worries daily that MJ may fall and hurt herself. My daughter is also learning how cannabis is helping MJ heal and recover. Rather than hiding my child from her cousin and her lifestyle, she is compassionate and has gained more through exposure than avoidance.

Please establish a dispensary system with tight operating rules so families like the Kaneshiros do not have to wait any longer or waste previous time making their child's medicine vs celebrating the blessings of every day life.

As a granddaughter of a former county police chief, I understand the need for regulation and law enforcement. However, please don't use those who abuse this system as a means to delay this matter any further.

Thank you for the opportunity to express my strong support of HB321 HD1.

From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 2:55 PM

To: FINTestimony

Cc: mminn811@gmail.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
M. Minn	Individual	Support	No

Comments: Please pass this bill without delay. It is sorely needed by patients and it is the clear desire of Hawaii voters. The time is now!

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Friday, February 27, 2014

Rep. Sylvia Luke, Chair House Finance Committee Rep. Karl Rhoades House Judiciary Committee

#### Re: TESTIMONY IN OPPOSITION TO HB-321

Dear Honorable Chairs Luke and Rhoades, and all Members of the House Finance Committee and House Judiciary Committees:

I submit this testimony on behalf of our church in strong opposition to HB-321.

As a Christian pastor who ministers to teens in Central Oahu and a father of eleven children ranging from young adults through elementary school-aged children—all of whom have attended and graduated from public schools or will attend/graduate from public schools. For these reasons, I am very passionate and extremely concerned about the issues that confront Hawaii's youth.

Over the years I have counseled married couples, young adults, teens and yes, even pre-teens about the affect of drugs on their lives—especially marijuana. The majority in the medical and law enforcement communities know that alcohol and marijuana are gateway drugs, and they are especially harmful to children. Bills such as HB-321 will make marijuana more available and will send the wrong message to our youth—that is, marijuana is less dangerous.

But more importantly, can I ask if you have considered the message that we are sending the world? Hawaii is unique—we are known around the globe as a land of paradise with the spirit of aloha. With bills that seek to make marijuana more accessible, we are introducing a culture that is not native to Hawaii.

I couldn't understand why we would do such a thing and then I recalled an article from in the Star-Advertiser (1/24/2014), 'FARMING OF PAKALOLO FOR EXPORT IS HOUSE BILL'S ULTIMATE GOAL". The article states, "some experts forecast \$2.3B in legal US sales of pot this year and four times as much over the next 15 years." Really, is that it? The soul of our state and the future health of our keiki is not worth 4000 times that amount!

I respectfully request that you NOT pass HB-321.

Sincerely.

ROJO HERRER MILILANI, HI

From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 2:25 PM

To: FINTestimony

Cc: Kawaihapai@hawaii.rr.com

**Subject:** Submitted testimony for HB321 on Feb 27, 2015 15:00PM

Attachments: Kaulana Na Pua - Huapala.pdf

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing	
Thomas T Shirai Jr	Individual	Comments Only	No	

Comments: Aloha Chair & Cmte Mbs, I strongly oppose HB 321 HD1 and ALL legislation in the House & Senate relating to Medical Marijuana until an extremely sensitive cultural concern is address and corrected which entails changing the publication entitled "Kaulana Na Pua" (www.kaulananapua.com) is changed to a more appropriate title. It's offensive, disrespectful and cultural desicration to Kanaka Maoli. the mele acknowledges Queen Liliuokalani and some of our most prominent chiefs along with a significant event in Hawaii's history. "Kaulana Na Pua" means "Famous Are The flowers" which is we the Kanaka Maoli. The words of this sacred meme are attached and from the Hula Songs & Chants website (www.huapala.org) In 2013 The Office of Hawaiian Affairs (OHA) funded Project Kuleana that made a video featuring some of our finest muscians performing this sacred mele. A known Kumu Hula had support to address Walt Disney's cartoon entitled Lilo & Stitch featuring a sacred chant and also a known photographer (Kim Taylor Reese) copyrighting Hula movements featured in his photographs. The legal term regarding the mentioned concerns are called Intelectual Property Rights. I strongly urge correction enacted before proceeding. Malama Pono (Make/Do things Right). Mahalo.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

#### finance1-Kim

From: mailinglist@capitol.hawaii.gov

Sent: Wednesday, February 25, 2015 9:22 PM

To: FINTestimony

Cc: drsconstruction@hawaii.rr.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

Attachments: image.jpg

#### **HB321**

Submitted on: 2/25/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing	
David Sugano	Individual	Support	No	

Comments: HOUSE FINANCE COMMITTEE Friday, February 27, 2015 HR321 HD1 Establishment of Marijuana Dispensaries Chair Luke, Vice Chair Nishimoto and members of the House Finance Committee. Thank you for this opportunity to provide personal testimony in strong support of HB321 HD1 relating to the establishment of marijuana dispensaries. My niece is MJ Hope Kaneshiro, that 6 year girl who depends on cannabis oil to control her non stop seizures. Since she was 4 months old, we watched her battle this destructive form of epilepsy. Her mom has an agriculture degree from UH and Michigan State University and yet she can not grow enough material or make Maile's oil consistent enough to stop her seizures. We traveled with them as they went to see mainland specialist who put them on non FDA approved medications which did not work. We see the cognitive benefits of her being on these homemade cannabis oils. Every month, we watch her seizures decrease or go totally out of control as her mom uses a test kit vs having access to a real testing lab. Expecting Hawaii families like the Kaneshiro's to go to work, sit in traffic, garden and then produce their own medicine is unrealistic. For 15 years, the state has a chance to create the perfect dispensary bill. Please do not waste another year drafting the perfect bill. If such a system was put in place years ago, I often wonder if my niece would be in the situation she is in today. Establishment of dispensaries will help to ensure services and quality medicine are in place for patients and their caregiving families at a time when they desperately need them. Thank you for the opportunity to express my strong support of HB321 HD1. Respectfully, David Sugano of Mililani, Oahu

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.



## STATE OF HAWAII DEPARTMENT OF HEALTH

P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov



# Testimony COMMENTING on HB321 HD1 RELATING TO MEDICAL MARIJUANA

## REPRESENTATIVE SYLVIA LUKE, CHAIR HOUSE COMMITTEE ON FINANCE

Hearing Date: February 27, 2015 Room Number: 308

- 1 **Fiscal Implications:** Approximately \$750,000 general fund appropriation and up to 7.0 FTE for
- 2 each of the two years of system development and operations.
- 3 **Department Comments:** The Department of Health (DOH) supports the intent of improving
- 4 access to medical marijuana patients who need safe and available access to their medication
- 5 statewide.

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- 6 DOH recommends the following guiding principles for enabling legislation:
  - Proposed appropriations must be sufficient but defer to the priorities in the Governor's Executive Budget Request,
    - Dispensary licensing and regulation must be financially self-sufficient.
      - The number of licenses offered/approved and the fee structure will determine program resources.
      - o The Department requests flexibility in setting numbers for both.
- A medical marijuana dispensaries system must be regulated by the State of Hawaii but
   operated within the private sector.
- A secure, accessible, and well-regulated dispensaries system must address many complex issues
- such as dispensary eligibility, quality control and safety, compliance and security, public
- 17 education, financial controls and sustainability, cultivation and manufacturing, distribution and
- retail, inter-state commerce, and zoning just to name several.

- 1 A successful implementation requires enabling legislation such as HB321 HD1 to provide for at
- 2 least two years:

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- 1. Funding \$750,000 is required to hire, contract, and procure the necessary resources for implementation and operations;
- 5 a. \$250,000 salary
- 6 b. \$125,000 IT development and maintenance
- 7 c. \$50,000 equipment and supplies
  - d. \$25,000 rent and utilities
- e. \$300,000 contracts for
- i. Scientific services (agricultural, laboratory, chemical)
- ii. Education and training (provider, patient, law enforcement, general public)
- iii. Security services (inventory control and site security),
- 2. Staffing 4.0 FTE at program start for set up and 7.0 FTE for operations;
- a. Implementation Phase/Year 1: 1 x Public Health Supervisor VI, 1 x Program
   Specialist V, 1 x Public Health Education IV, 1 x Secretary III
- b. Operations Phase: Additional 1 x Investigator V, 1 x Investigator IV, 1 x
   Accountant III
- 19 DOH considers implementation and startup costs to be a cost of government, and with the
- 20 uncertainty of the economic viability of applicants, requests that <u>repayment of startup funds be</u>
- 21 repealed in Bill Section 10.
- Thank you for the opportunity to offer comments.

#### Kaulana Nâ Pua (Famous Are The Flowers) - Ellen Keho'ohiwaokalani Wright Prendergast

Kaulana nâ pua a'o Hawai'i Kûpa'a ma hope o ka 'âina Hiki mai ka 'elele o ka loko 'ino Palapala 'ânunu me ka pâkaha

Pane mai Hawai'i moku o Keawe Kôkua nâ Hono a'o Pi'ilani Kâko'o mai Kaua'i o Mano Pa'apû me ke one Kâkuhihewa

'A'ole a'e kau i ka pûlima Ma luna o ka pepa o ka 'ênemi Ho'ohui 'âina kû'ai hewa I ka pono sivila a'o ke kanaka

'A'ole mâkou a'e minamina I ka pu'u kâlâ o ke aupuni Ua lawa mâkou i ka pôhaku I ka 'ai kamaha'o o ka 'âina

Ma hope mâkou o Lili`ulani A loa`a ê ka pono o ka `âina \*(A kau hou `ia e ke kalaunu) Ha`ina `ia mai ana ka puana Ka po`e i aloha i ka `âina \*Alternate Stanza Famous are the children of Hawai'i Ever loyal to the land When the evil-hearted messenger comes With his greedy document of extortion

Hawai'i, land of Keawe answers Pi'ilani's bays help Mano's Kaua'i lends support And so do the sands of Kakuhihewa

No one will fix a signature To the paper of the enemy With its sin of annexation And sale of native civil rights

We do not value
The government's sums of money
We are satisfied with the stones
Astonishing food of the land

We back Lili`ulani
Who has won the rights of the land
\*(She will be crowned again)
Tell the story
Of the people who love their land
\*Alternate Stanza

Source: Na Mele o Hawai'i Nei by Elbert & Mahoe - Written Jan. 1893, published in 1895, this himeni opposed the annexation of Hawai'i to the United States. The original title was Mele 'Ai Pohaku or The Stone-eating Song, and was also known as Mele Aloha 'Aina or the Patriot's Song. This song was composed as Ellen Wright Prendergast was sitting in the garden of her father's house in Kapalama. Members of the Royal Hawaiian Band visited her and voiced their unhappiness at the takeover of the Hawaiian Kingdom. They begged her to put their feelings of rebellion to music.



Ellen Keho'ohiwaokalani Wright Prendergast



2/12/2015





Hawaii's Voice for Sensible, Compassionate, and Just Drug Policy

TO: HOUSE COMMITTEE ON FINANCE

FROM: PAMELA LICHTY, M.P.H., PRESIDENT

DATE: FEBRUARY 27, 3 p.m., ROOM 308

RE: H.B. 321, HD1 RELATING TO MEDICAL MARIJUANA – IN STRONG

**SUPPORT** 

Good afternoon Chair Luke, Vice Chair Nishimoto and members of the committee. My name is Pam Lichty and I'm President of the Drug Policy Action Group (DPAG), the government affairs arm of the Drug Policy Forum of Hawai'i.

First, I'd like to thank the Committees very much for scheduling HB 321, H.D.1 - which DPAG strongly supports - today.

We have closely followed the working of the Task Force, mandated by last session's HCR 48, to make recommendations for a medical cannabis dispensary system for Hawai'i. Our sister organization, the Drug Policy Forum of Hawai'i was an active participant.

We believe that HB 321, H.D.1 accurately reflects the recommendations of the Task Force, which as you know, were the results of <u>many</u> hours of research, digesting testimony from patients, physicians, and others affected by the current medical marijuana program, and consultation with medical cannabis experts in other jurisdictions.

We know the members are well aware by now of the crying need for a dispensary system, so I will not restate it here.

We do have some comments specific to the draft before you today. The first is about the very narrow definition of "manufactured marijuana product" which excludes virtually every kind of edible. We fear that this narrow definition is due to various news reports from Colorado about the problems with these products. In response, Colorado is changing the way these products are regulated to

include more stringent requirements about packaging including childproof containers, opaque packaging, and other measures to make any edible products less appealing to children. They are NOT eliminating their production and sale.

This is all well and good, but much of the responsibility for ensuring child safety can and should be parents' responsibilities. Just as you would not leave a bottle of liquor within easy reach of children, nor put caustic cleaning products or prescriptions in an easy-to-reach unsecured place, so cannabis products should be stored safely. This is why education to the public, to providers and to all parties, as called for in this draft, is a necessity.

I recently had an office visit with a physician in Colorado. She told me that by using edibles, her partner who is suffering from cancer, was able to cut his intake of narcotics by half. Edibles do have uniquely helpful uses such as providing a steady release of cannabinoids to relieve pain without resorting to an every four-hour regimen with all the side effects of heavy narcotics.

Our second concern is about the 750' rule in this draft specifying that any dispensary or production center be this distance from a school, playground, public housing, etc. It is important to realize than in a dense urban setting such as many on Oahu, it is almost impossible to find a properly zoned location that fulfills this requirement.

We have been deeply impressed by DOH's very hard work on the Task Force and on the transition of the medical marijuana program from Public Safety. They are committed to establishing a dispensary system that's the best of its kind. We respectfully suggest that this Committee re-visit some of the time constraints in this measure about how soon licenses can be issued, when dispensaries and production centers can be up and running, and so forth. As patient advocates, we urge you to give DOH more leeway in setting these time frames.

Having said this, we want to see this system in operation ASAP. The sooner it is, the sooner the special fund will begin to collect monies and the sooner the program will become revenue neutral. And the sooner pateints can begin to receive the services they need.

We strongly support the DOH requests for sufficient funding and staffing to make the program a success and to move Hawaii from being last among medical cannabis states in terms of modernization and moving to the front.

With the hard work of the Task Force and the multiple models of dispensaries available, we are confident that the Hawai'i state legislature can craft an excellent, state-of-the-art system that provides for the needs of the patients while safeguarding the community.

In closing, I'd like to remind the committee that there is extremely strong support statewide for establishing dispensaries. Last January's Honolulu-based QMark Research survey found that a stunning 85% of registered voters support a dispensary system in Hawai'i nei. We ardently hope that 2015 will be the year in which legislation to establish such a system will finally be enacted.

DPAG urges the Committee to pass out HB 321, H.D.1 to the full House with a strong recommendation for passage. Thank you for very much listening and for giving us the opportunity to testify.



Testimony of Malama Minn Vice President, Hawaiian Standard

Before the House Committee on FINANCE

Friday, February 27, 2015 3:00 pm State Capitol, Room 308

In consideration of HOUSE BILL 321 RELATING TO MEDICAL MARIJUANA

Good morning Chair Luke and members of the committee. Thank you for the opportunity to testify.

A medical cannabis dispensary system is badly needed in our state, so thank you for recognizing the need. I strongly support this bill. Overall, this bill is thoughtfully crafted thanks in large part to the work of the Task Force over the last year. I urge you to pass this measure without delay. Patients and caregivers have been waiting and working for this for over a decade and we are ecstatic that we may not have to suffer much longer.

I have a few comments to provide:

- Section 321-H(6) requires the department to establish a training and certification program for dispensary employees. I feel like this may demand too much of the department, given their numerous other responsibilities. We do not object to training and certification, but rather suggest that this burden be shared with owners and operators of dispensaries.
- Section 321-C€ authorizes the licensing of production centers on January 1, 2017. The previous section authorizes the dispensaries to begin operations on July 1, 2017. This leaves just 6 months for production centers to create enough inventory to meet demand. I strongly suggest amending the January 1, 2017 licensing to an earlier date. Production centers will need more time to build out facilities, fit them for appropriate security equipment, procure and cultivate sufficient amounts of medical marijuana, and train employees. Please consider revising.
- Lastly, this program is designed to be self-sustaining. It should pay for itself through fees and
  taxes. We don't want any general fund appropriations and we shouldn't need it. Please heed
  the input provided by the Department of Health. They have done the due diligence necessary to
  determine how much fees and tax revenue will be necessary for this program to sustain itself.
  After initial implementation, this program has the potential to provide revenue to the state
  which can and should be used for education and other important public health and safety
  initiatives.

Again, please pass this measure without delay. It's been a long time coming and Hawaii is ready to embrace it.

Thank you again for your time.

#### finance1-Kim



From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 4:14 PM

To: FINTestimony

Cc: mountainmama1979@yahoo.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Laurie Bauers	Individual	Support	No

Comments: Aloha- As a medical marijuana patient with severe pain and migraines, I need a certain amount of medicine in a week. Allowing patients to have safe access to medicinal marijuana will improve the lives of patients like me. Thank you for your time. Laurie Bauers

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.



Testimony in Opposition to HB 321 HD1 - Relating to Medical Marijuana

Hearing on: February 27, 2015, 3:00 pm Conference Room 308 of the State Capitol

TO: Committee on Finance Rep. Sylvia Luke, Chair

Rep. Scott Nishimoto, Vice Chair

FR: Alan Shinn, Executive Director Coalition for a Drug-Free Hawaii 1130 N. Nimitz Hwy, Suite A-259 Honolulu, HI 96817 (808) 545-3228 x29

Please accept this testimony in opposition to *HB 321 HD1 – Relating to Medical Marijuana*, that establishes medical marijuana dispensaries and production centers; appropriates funds. As the representative from the Coalition for a Drug-Free Hawaii, I sat on the Medical Marijuana Dispensary System Task Force and participated in formulating many of the recommendations that were incorporated into HB 321.

While the task force worked diligently and identified many important issues in establishing medical marijuana dispensaries and production centers in Hawaii, it was unable to adequately address all those issues. A *Minority Report to the HCR 48 Medical Marijuana Dispensary System Task Force* was distributed on 1/23/15 detailing those critical issues. These included the administration and regulation of medical marijuana dispensary and production system and enforcement of regulations and laws.

From a substance abuse prevention point of view, here are the key issues with establishing a medical marijuana dispensary system in Hawaii:

- Harm to youth
- Big Marijuana commercialization
- Need to define, "Is marijuana medicine?"

#### Harm to Youth

Allowing the production and distribution of marijuana for even medical use in Hawaii, sends a conflicting message to our youth and effectively helps to lower the perceived risk of harm. From 40 years of national SAMHSA alcohol and other drug use data, we know that when perceived risk of harm goes down, substance use will likely increase. It follows that States with medical marijuana that allows both home cultivation and legal dispensaries, show increases in marijuana use.

Without a strong regulatory system in place it will be extremely difficult to prevent the diversion of smoked marijuana, edibles, and related products outside of the dispensary system. That could mean more availability and access to marijuana products and potential harm to our children and youth.

New brain research and studies have shown that regular use of high THC content marijuana can cause brain impairment, loss of IQ points, and addiction, especially among youth. Marijuana use has also been linked to mental illness, especially schizophrenia and psychosis.

Parents, especially those who are immigrant, are ill-equipped to discuss marijuana use prevention with their children because of the rhetoric and mixed messages surrounding medical marijuana, decriminalization and legalization.

#### Big Marijuana

Establishing a medical marijuana dispensary system that is not well regulated, could help set the stage for the establishment of a new Big Marijuana industry, much like alcohol and tobacco, with many unintended consequences and huge social costs.

Historically, we know that the social costs of alcohol and tobacco far exceed the tax revenues by more than tenfold. Alcohol and tobacco industries have not contributed to the overall health of our people and rely on attracting heavy and chronic users as a way to maintain sales and profit.

The environmental costs of cultivating tens of thousands of marijuana plants for distribution to dispensaries was not discussed or calculated. Use of natural resources of land and water, as well as use of electricity, flammable gases for producing by products, and proper waste disposal of contaminates are critical issues for our island communities.

#### Is Marijuana Medicine?

Marijuana legalization and wide-scale medical marijuana are not endorsed by the major medical and health organizations including the American Academy of Pediatrics, American Psychiatric Association, and the American Medical Association.

There is no evidence that marijuana is beneficial for the treatment of any psychiatric disorders. More research on non-smoked components of marijuana is recommended for potential treatment of epilepsy and other specific medical conditions. Several CBD based medicines are being fast tracked by the FDA and should be on the market as prescribed medicines in the next few years. These may have a positive effect on how marijuana as medicine is viewed.

Other health related marijuana issues that need research include the long term health effects of marijuana second hand smoke and just emerging studies on the in utero effects of marijuana use on unborn babies.

#### <u>Issues for the House Finance Committee:</u>

- It is unclear how the State will be able to tax and regulate medical marijuana dispensaries, production centers, and other related vendors when these are cash only businesses. It is unlikely that any banking institution in Hawaii will do business with marijuana related entities as marijuana is still classified as a Schedule I drug by the federal government.
- It is unclear whether the Department of Health will use any of its requested medical marijuana dispensary system staff positions for enforcement of regulations to prevent diversion of marijuana products into the community that might harm children and youth. If not, then recommend additional funding for State and local law enforcement positions to assist DOH.
- HB321 HD1 does not include a complete public health approach to medical marijuana use. If it did, it would acknowledge some medical marijuana users, both youth and adults, will likely develop dependency and will require treatment services. In addition, further normalizing the use of marijuana in the community will likely increase use among youth resulting in more referrals for intervention and treatment. Recommend additional funding for substance abuse prevention and treatment services.
- It is unclear how the State will mandate that all marijuana products be lab tested for contaminants and THC levels when facilities do not exist in Hawaii. Recommend funding to set up lab testing facilities for marijuana dispensaries, production centers, and home cultivation users.

Thank you for the opportunity to testify on HB 321 HD1.

#### finance1-Kim

From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 7:38 PM

To: FINTestimony

Cc: alohilani7@gmail.com

Subject: \*Submitted testimony for HB321 on Feb 27, 2015 15:00PM\*

#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Karen Alohilani Hue Sing	Individual	Support	No

#### Comments:

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#### POLICE DEPARTMENT

#### CITY AND COUNTY OF HONOLULU

801 SOUTH BERETANIA STREET · HONOLULU, HAWAII 96813 TELEPHONE: (808) 529-3111 · INTERNET: www.honolulupd.org

KIRK CALDWELL MAYOR

LOUIS M. KEALOHA CHIEF

DAVE M. KAJIHIRO MARIE A. McCAULEY DEPUTY CHIEFS

OUR REFERENCE JK-TA

February 27, 2015

The Honorable Sylvia Luke, Chair and Members Committee on Finance House of Representatives Hawaii State Capitol 415 South Beretania Street Honolulu, Hawaii 96813



Dear Chairs Luke and Members:

SUBJECT: House Bill No. 321, H.D. 1, Relating to Medical Marijuana

I am Jerry Inouye, Major of the Narcotics/Vice Division of the Honolulu Police Department, City and County of Honolulu.

The Honolulu Police Department opposes House Bill No. 321, H.D. 1, Relating to Medical Marijuana. This bill seeks to establish a regulated statewide dispensary system for medical marijuana.

Part II, Subsection 321-M, appears to preserve qualifying the patients' rights to cultivate an adequate supply of marijuana pursuant to Part IX of Chapter 329. This subsection makes it difficult to regulate compliance with the law regarding limits of the amount of marijuana the patient can possess, particularly in cases where patients grow their own marijuana and obtain it from a dispensary.

The bill sets limitations on manufactured marijuana products by equating the product with the physical weight of the marijuana used to manufacture it. It is not adequate to use weight as the sole measurement as different strains of marijuana can have widely raging Tetrahydrocannabinol (THC) levels.

The Honorable Sylvia Luke, Chair and Members
Committee on Finance
Page 2
February 27, 2015

The Honolulu Police Department sympathizes with those who have serious illnesses and benefit from using medical marijuana. However, this bill as written would be virtually impossible for law enforcement to regulate and could easily lead to the diversion of large quantities of marijuana for illegal use and distribution. In addition, with the alternative forms of marijuana being proposed, there will be an increased chance of accidental ingestion by children.

The Honolulu Police Department urges you to oppose House Bill No. 321, H.D. 1, Relating to Medical Marijuana.

Sincerely,

Jerry nouye, Major Narcotics/Vice Division

APPROVED:

Louis M. Kealoha

Chief of Police

## HAWAII SAFE ACCESS GROUP

"PACIFIC WELLNESS COALITION"

The Honorable Rep. Sylvia Luke, Chair And Rep Scott Y Nishimoto, Vice Chair and Members of the FINANCE Committee



From: KB, Executive Director of Public Relations

**RE:** HB321 – Relating to Medical Marijuana (Health)

POSITION of HB321: Strongly in SUPPPORT

Dear Chair Rep. Sylvia Luke, Vice- Rep Scott Y Nishimoto and Members of the Finance Committee:

On behalf of Hawaii Safe Access Group, our Group is in **Strong Support of HB321** Relating to Medical Marijuana (Health) which would Establish and allow Medical Marijuana Dispensaries and Production in the State of Hawaii.

The purpose of HB321 is to establish a Safe Access system for the Patients that are in need of their Medicine. By allowing this system to be in effect, you ALLOW several important Key Factors to take place. The Following Factors are as listed:

- Safe Access for all Patients (Patients are allowed to obtain their Medicine without RISK)
- Disrupt and Minimize Black Market (Control of Illegal dealings)
- Huge Yearly Tax Revenues
- A Trust & Safety system between the Dispensaries and Public Safety.
- Restoration of Medically III Patients (Lives will be SAVED immediately)

Patients who must resort to obtaining their medicine on the black market face various risks including robbery and assault. They are exposed to dangerous individuals and environment in order to obtain their desperately needs of Medical Cannabis. This contradicts the intent of ACT228. Establishing Dispensaries would allow for SAFE ACCESS and also taxation as well as the creation of jobs in both the public and private sector and most of all, it becomes a Life Saving factor for all of Hawaii`s Medically Ill Patients that are severely sick and/or on their dying bed.

The best system for Hawaii is a system that promotes transparency and secured regulated rules that keeps all order of Compliance with all dispensaries including all production facilities as well. It is a fact that when a well regulated system is in compliance, not only does crime in the black market minimizes but Hawaii will be able to focus and crack down on more hard core drugs such as ICE, Heroin, Cocaine, these are the Drugs that are ruining Hawaii Families and need more attention to the matter at hand now.

**Hawaii Safe Access Group** is in **STRONG SUPPORT of HB321** and will answer any Questions at the Scheduled Hearing. Please have Compassion for **HB321**, this Is not a question about should we allow it, it should be more of a factor of START NOW, as someone today right now is severely sick and the importance of having a Dispensary for them to obtain their medicine is a true fact of Life and Death.

Mahalo K. B Hawaii Safe Access Group

From: mailinglist@capitol.hawaii.gov
Sent: Friday, February 27, 2015 7:30 AM

To: FINTestimony

Cc: noahhardwick1@gmail.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM



## **HB321**

Submitted on: 2/27/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Noah Hardwick	Individual	Support	No

Comments: We desperately need legal, and safe access for our patients.

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From: mailinglist@capitol.hawaii.gov
Sent: Friday, February 27, 2015 6:18 AM

To: FINTestimony

Cc: cngoolsby@gmail.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM



#### **HB321**

Submitted on: 2/27/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
charleigh.goolsby	Individual	Comments Only	No

Comments: as a tennesseean I know first hand the benefits that lergalized marijuana in any state would provide as a life long asthma sufferer it helps realx the muscles as a time bomb for breast cancer if not already habving it eases pain, also I a stateside follower of several native islanders I believe it will lower crime it has done so in Colorado per stats this bill is important because if you and alaslka pass my state may jump on borad

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov
Sent: Friday, February 27, 2015 1:31 AM

To: FINTestimony

Cc: tasymons56@gmail.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM



## **HB321**

Submitted on: 2/27/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Toni Symons	Individual	Support	No

Comments: Thank you for moving this forward. The time is now, your constituency needs your help!

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From: mailinglist@capitol.hawaii.gov
Sent: Friday, February 27, 2015 12:49 AM

To: FINTestimony

Cc: mary@mauivortex.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM



# HB321

Submitted on: 2/27/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
Mary Overbay	Patients Without Time	Oppose	No

Comments: Win! Win! Win! for Hawaii! - Legalize, Tax and Regulate. Hawaii already has a huge, world famous, recreational marijuana industry that could be legalized and generate much needed revenue to heal our beautiful islands. By legalizing recreational marijuana we can legitimize thousands of small businesses, revitalize our economy, increase tourism, and raise significant amounts of revenue from the tourist industry. Win! Win! Win! for Hawaii! - Legalize, Tax and Regulate recreational marijuana.

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#### February 26, 2015

To: Committee on Finance

Hearing: February 27, 2015, 3:00 P.M., Conference Room 308

From: Anakapuakela Kaleopaa

of the Committee on Finance:

Re: Support of HB 321 HD 1, Relating to Medical Marijuana

Representative Sylvia Luke Chair, Representative Scott Y. Nishimoto Vice Chair, and members

My name is Anakapuakela Kaleopaa, and I am writing today in support of HB 321 HD 1, Relating to Medical Marijuana.

I strongly support this bill for the following reasons:

- Patients need better access to legal medical marijuana.
- Marijuana is supplemented for pharmaceuticals by many patients. The more dangerous of the two is easily accessible through an MD.
- Dispensaries can be a positive effort in relieving some of the financial pressure the state of Hawaii is under.
- Patients from other states vacationing in the islands will be able to have legal access to marijuana while contributing into the economy.

I further oppose the idea that marijuana is a dangerous drug. If marijuana is decriminalized, it would free up space in the prison systems as well as the funding it takes to prosecute. The state will also have a lucrative business that promotes cultural sustainability.

Thank you for this opportunity to offer these comments.



From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 10:07 PM

To: FINTestimony Cc: khw666@hawaii.edu

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM



#### **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Keliimakamae Waiolama	Individual	Support	Yes

Comments: February 27, 2015 Testimony on House Bill No. 321 Relating to Medical Marijuana Committee on Finance Chair Luke, Vice Chair Nishimoto, and Members of the Committees: My name is Keliimakamae Waiolama, I am a student at the University of Hawaii at Manoa's Myron B. Thompson School of Social Work, a volleyball coach of 15 years to keiki 12-18 years of age, and an Educational Assistant for 9 years and now Part-Time Teacher. The measure that I am testifying on is HB 321 to establish dispensaries where medical marijuana patients will be able to purchase their prescription in a legal and safe way. I am testifying in SUPPORT of HB 321 to provide dispensaries and production centers in the State of Hawai'i for the use of medical marijuana by registered patients. The medicinal ingredient in marijuana is called, "Cannabidiol", or better known as CBD1. CBD's medical use has been proven to help patients who suffer from diabetes, cancer, cardiovascular disease, and even epilepsy. The CBD in marijuana can be extracted from the THC in marijuana and does not give patients the feeling of being "stoned" or "high", and it can also counteract the THC in marijuana. Medical marijuana patients use the product to be able to enjoy their lives, and sometimes is the only option for them. I personally know ample amount of patients personally, Aunty, uncle, many friends who legally obtain a medical marijuana card and have many issues with the current system. Without any "legal" options to purchase, many of these people are forced to purchase medicine from the illegal market, thus partaking in the massive amount of illegal marijuana. A lot of people would like to obtain their medicine just as other prescriptions, and not have to grow their own plants, but there is no current system since medical marijuana became legal in the State of Hawai'i in 2000. Thank you so much for your consideration, and please SUPPORT HB 321 so that patients can have a safe place to purchase medicine, and to direct revenue into a legal system, rather the current black market.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 10:06 PM

To: FINTestimony

Cc: fehren.jones@gmail.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM



## **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
fehren	Individual	Support	No

Comments: Aloha.. I'll keep this short. I have already submitted a testimony earlier for the past hearings at least 3 times. I am still in full support of this bill (HB 321). I also wanted to say it's been a looong journey and it has come so far, so with this, I wanted to say thank you for all the listening of many thoughts, worries and opinions. Thank you for even putting medical cannabis into consideration. But most of all, thank you for all the time that everyone has put in this. Time is what we can never get back, so thank you for giving this HB 321 bill a chance. Mahalo

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From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 9:38 PM

To: FINTestimony

Cc: ariannafeinberg@gmail.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM



# **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Arianna Feinberg	Individual	Support	No

Comments: Please SUPPORT the passing of HB321 so that Hawaii can finally have medical marijuana dispensaries. My parents both use marijuana medicinally and it has benefitted all of our lives immensely. Dispensaries are crucial for people without the resources to grow their own as well as for people without the social network to get a medical marijuana caregiver. Additionally dispensaries will be able to invest in technology to breed high CBD plants and create specialized extracts. I hope I will never need medical marijuana myself but I hope that the system is in place in case I shall one day need it. As a side note I would like to point out the stigma against medical marijuana. In the bill, dispensaries need to be 750 feet away from any schools. A medical marijuana dispensary should not be treated any differently than a pharmacy. We need to shift the way we think about medical marijuana so that patients that would benefit from it are not deterred by cultural stigma. The creation of dispensaries is a great step towards cultural acceptance of medical marijuana. Thanks for considering my testimony and supporting HB321.

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From: mailinglist@capitol.hawaii.gov

Sent: Thursday, February 26, 2015 8:59 PM

To: FINTestimony

Cc: carrmaria@hotmail.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM

Attachments: Medical Cannabis Dispensary Testimony.docx



# **HB321**

Submitted on: 2/26/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing	
Maria Pena	Individual	Support	No	

#### Comments:

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Kalawai'a Goo 60 N Beretania St. #1402 Honolulu, HI 96817 kalawaiag@hotmail.com



Representative Sylvia Luke, Chair Representative Scott Y. Nishimoto, Vice Chair Committee Finance

Kalawai'a Goo, student at Myron B. Thompson School of Social Work, Veteran.

Friday, February 27, 2015

Support for H.B. 321, HD1, Relating to Medical Marijuana

I support H.B. 321, HD1

I have done extensive research on various topics surrounding the marijuana issue from health benefits, to enforcement disparity, black market distribution, social and economic impacts, etc. In my research I have not come across anything that supports the conservative/worst case scenario agenda. I do not believe that any public policy should be made on the speculation of a worst-case scenario.

My research strongly suggests that the prohibition on marijuana is as big a failure as the prohibition on alcohol, which in its final assessment did far more social damage than good.

The medical benefits are well supported by legitimate research, which clearly demonstrates the gross error in marijuana's Schedule I classification. The continued classification erodes credibility and the public's faith in government.

The social harm has been grossly overstated as evidenced by the success of many prominent and intelligent public figures, which includes the current and former U.S. Presidents. For these and many other reasons, I ask for your support in this bill and any other bill that moves marijuana away from the costly and futile efforts that criminalize use, possession, access, etc.

Mahalo for the opportunity to testify.

#### finance8-Melanie

From: mailinglist@capitol.hawaii.gov
Sent: Friday, February 27, 2015 10:12 AM

To: FINTestimony

Cc: zako811@gmail.com

Subject: \*Submitted testimony for HB321 on Feb 27, 2015 15:00PM\*

## **HB321**

Submitted on: 2/27/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Zachary Lee	Individual	Support	No

#### Comments:

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LATE

Testimony Offered for Saturday February 7, 2015, 10am Heard by the Committee on Health and Committee on Judiciary House of Representatives, The Twenty-Eighth Legislature, Regular Session of 2015

Measure number 321
Testimony offered by:
Michelle Tippens
aka TheGoddessM
Staff Writer
Kaulana Na Pua Magazine

Good morning ladies and gentlemen of the Judiciary and Health comittees, my name is Michelle Tippens and I am a resident and active voter in Makiki, within the boundaries of the Ahupua'a of Honolulu, on the Island of O'ahu. I am a disabled veteran of the US Army, a single mother, a full time student (at Kapi'olani Community College, obtaining my third upper level degree), a journalist with a staff position at the Kaulana Na Pua Magazine and a medical marijuana patient. I have an extensive list of medical conditions and injuries, the highlights of which are composed of multiple traumatic brain injuries, a degenerative condition in my cerebellum and spine, fibromyalgia, multiple fractured vertebrae, PTSD and a ribcage so damaged I had to undergo surgery in order to have it wired back together and bone grafted in to facilitate healing. Medical marijuana has allowed me to manage my symptoms so effectively I have been able to discontinue the use of over 25 prescription medications, many of which I had been given for over a decade. Further, I have been able to recover my well-being and a significant portion of my lost mobility, as I had at one point been confined to the use of a walker for over 2 years having progressed from using a cane as my condition deteriorated. All of my conditions still affect me daily; however, therapeutic marijuana use has allowed me to engage in my life at a level beyond that dictated by my injuries and illnesses. That said, I would like to address the bill before the committee today regarding the establishment of medical marijuana dispensaries in the state of Hawaii, namely House Bill 321.

This bill seeks to establish locations, similar to pharmacies such as Long's, within which licensed medical marijuana patients are able to obtain not simply medical marijuana, but also purchase items such as seeds that allow patients to continue to grow their own medication at home if they are able and so desire. Further, these locations will provide a place of guidance and knowledge to medical marijuana patients that will allow them to find the appropriate types of marijuana to grow to address their conditions most effectively, a service that is vital when trying to apply medical marijuana therapeutically. Paramount to what these locations offer is the ability of patients to obtain medication when they need it, not after they have needed the medicine for months and have waited for Mother Nature to grow it. Many patients are not able to wait safely and even more do not have the physical ability or skill set needed to grow medical marijuana successfully. The idea of expecting people to grow their own rice is ludicrous, why would the expectation of the people to grow their own medication be any less so?

The fact is, many people like myself have injuries or medical conditions that make the sheer physical labor of growing marijuana a rather arduous task and many would prefer to be able to go to a store and talk to a person with knowledge regarding selection and purchase their medication from the store, just like they purchase other medications. I am presented with questions daily regarding strain selection and oftentimes patients do not understand what they are looking for simply because the only information they are able to draw from comes from mass media, which is a poor place from which to draw an education, in particular an education regarding one's health. Passing HB321 would allow people who

Testimony Offered for Saturday February 7, 2015, 10am
Heard by the Committee on Health and Committee on Judiciary
House of Representatives, The Twenty-Eighth Legislature, Regular Session of 2015
Measure number 321
Testimony offered by:
Michelle Tippens
aka TheGoddessM
Staff Writer
Kaulana Na Pua Magazine

prefer to grow their own medicine at home to do so, while allowing others who choose to go to a store and purchase the medication they have decided is best for them. In reality, this bill simply looks to give the freedom to choose back to the people within the arena of medical marijuana.

Many people would like to try medical marijuana to see if it is an effective alternative to bottles of pills but do not feel the known up front costs to obtain and try medical marijuana outweigh the potential for benefit gained from its use. These 'costs' include, but are not limited to: finding/paying a doctor for an appointment, registering and paying for a license, finding a source for seeds (the sale and purchase of which is currently illegal, regardless of why) and growing the plant successfully before being able to simply try medical marijuana and see if it works for them. Once the patient undergoes all of this work, time and effort, if the marijuana is ineffective for their needs, the patient then has to make the decision to try the whole endeavor again with a different strain, meaning finding and buying more seeds (and breaking the law again), or simply to write off medical marijuana.

A dispensary system would allow patients to obtain their doctor's recommendation and go to a store within which employees will (ideally) be capable of assisting the patient with strain selection and allow the patient to purchase small amounts of different strains in order to let the patient find a strain that works best for their specific needs and medicative demands. A dispensary system also allows patients to return to the same place and get the same marijuana that has already worked for them on a consistent basis, giving them the most benefit and relief.

I would like to conclude by stating that I support HB321. While I may not believe this bill is flawless or the final solution to a rapidly shifting area within our society and culture, I believe this bill is an essential step toward indemnifying the people of the suffering they have endured using less natural methods to treat illnesses and chronic conditions. The beauty of a democratic legislative system is its plasticity, its ability to evolve with the demands of the people for freedom and the needs of the community for safety. As issues with the bill's implementation are isolated, amendments can be voted upon and enacted. I count myself blessed to live within a society that facilitates our ability as a community to create legislation and continue to adjust it as the need arises. I encourage the 2015 Legislature of Hawaii to enact HB321, and mahalo again for your attention during my testimony.

#### DEPARTMENT OF THE PROSECUTING ATTORNEY

#### CITY AND COUNTY OF HONOLULU



ALII PLACE
1060 RICHARDS STREET • HONOLULU, HAWAII 96813
PHONE: (808) 547-7400 • FAX: (808) 547-7515

KEITH M. KANESHIRO PROSECUTING ATTORNEY



ARMINA A. CHING FIRST DEPUTY PROSECUTING ATTORNEY

# THE HONORABLE SYLVIA LUKE, CHAIR HOUSE COMMITTEE ON FINANCE

Twenty-Eighth State Legislature Regular Session of 2015 State of Hawai`i

February 27, 2015

#### RE: H.B. 321, H.D. 1; RELATING TO MEDICAL MARIJUANA.

Chair Luke, Vice-Chair Nishimoto, and members of the House Committee on Finance, the Department of the Prosecuting Attorney of the City and County of Honolulu submits the following testimony in opposition to H.B. 321, H.D. 1.

After Colorado began permitting medical marijuana dispensaries in 2010-2013, the rate of hospitalizations and Emergency Room visits for possible marijuana exposure increased 5-fold for children up to 9 years old, as compared to the nine years prior. In the same period, the average number of calls to the Rocky Mountain Poison and Drug Center for marijuana exposure nearly doubled. While H.B. 321, H.D. 1, does present significant improvements over the original version of this bill, the Department is very concerned that it still attempts to establish a system for the commercial production and sale of medical marijuana that far outweighs any indicated demand, and in doing so, opens the door to increased public safety issues, abuse and/or illicit distribution. In particular, H.B. 321, H.D. 1, would leave law enforcement unable to effectively enforce an "adequate amount" of medical marijuana per permit, as it allows patients and caregivers to simultaneously grow their own supply of marijuana and purchase from dispensaries, and further allows numerous individuals to transport unrestricted quantities of marijuana at any given time.

As of December 2014, the State's medical marijuana database indicated that there are <u>318</u> registered medical marijuana patients—statewide—who are unable to grow their own medical marijuana (and do not have a caregiver who can grow it for them). 221 of these patients are registered on O'ahu, 78 on Maui, 12 on the Big Island, 6 on Kaua'i, and 1 on Moloka'i. Given these figures, the Department believes it would be highly unreasonable to mandate that the number of medical marijuana dispensary licenses issued be directly proportionate to the <u>total</u> number of (over 13,000) medical marijuana patients statewide; this indicates approximately 26

licenses would have to be issued, when the only known customer-base is the 318 reported individuals. For a venture that presents such grave risks for law enforcement and public safety, it should <u>not</u> be assumed that all remaining medical marijuana patients will switch to purchasing marijuana from a dispensary, particularly where the costs of growing one's own supply are very nominal. New problems will undoubtedly arise if/when supply greatly outweighs demand, and there is nowhere for the excess marijuana to go.

Indeed, the only reason why so many dispensaries may be needed is if registered patients had *no other way* to get medical marijuana but through a dispensary; and if the Legislature is inclined to prohibit medical marijuana users from growing their own supply, that may be a very different discussion. However, as written, H.B. 312, H.D. 1, takes no steps to prohibit registered patients from continuing to grow medical marijuana, and in fact, expressly allows it.

Although H.B. 312, H.D. 1, maintains the current definition of an "adequate supply" of medical marijuana (not more than 7 plants and 4 ounces of usable marijuana at any given time), this definition quickly loses significance when patients and caregivers are each allowed to purchase medical marijuana at dispensaries, while simultaneously growing and maintaining their own separate supply. While H.B. 312, H.D. 1, does include limitations on how much medical marijuana a dispensary may sell to each patient/caregiver in a particular time frame, it appears to rely on the patient/caregiver to self-report any purchases made from other dispensaries, rather than implementing an automated and/or unified tracking system. Even if such a system were in place, it seems dispensaries would have no knowledge of how much marijuana a patient and/or caregiver have outside of what they are purchasing at dispensaries.

This problem is only exacerbated when patients and caregivers are allowed to transport unrestricted amounts of marijuana—separately and simultaneously—in addition to maintaining a supply at their home or grow site. If such a blanket allowance is made, it will be impossible for law enforcement to determine how much marijuana is being held or transported under a medical marijuana permit at any given time. Moreover, it is unclear why parents of all medical marijuana patients would be permitted to transport marijuana, even if they not registered caregivers, or if they provide no care to the patient at all. We also note that no definition of "parent" is provided, yet this term often includes a multitude of individuals in today's families. If all of these people are allowed to transport marijuana at the same time, under the same permit, in any amount up to an "adequate supply," this presents a prime opportunity for abuse and illicit distribution.

With regards to manufactured marijuana products, the Department is very concerned that such products may contain flavoring agents or other additives that would potentially appeal to youth. Given the problems seen in Colorado, the Department does not believe that H.B. 312, H.D. 1, contains adequate precautions to prevent and discourage youth from consuming these products (whether accidentally or intentionally). This is particularly true of lozenges, which are essentially indistinguishable from candy.

In addition to the above, there are numerous other aspects of H.B. 312, H.D. 1, that raise serious concerns for law enforcement, and/or make it nearly impossible to enforce existing laws:

• Provisions allowing dispensary owners and employees to transport medical marijuana between islands, and allowing producers to transport (potentially hundreds of) marijuana plants at a time, presents a huge risk for abuse and/or outright illicit activity.

- The Department is greatly concerned that medical marijuana production centers and dispensaries could potentially be owned or operated by persons previously convicted of felonies related to marijuana.
- According to various sources, medical marijuana dispensaries would not be permitted to
  deposit their revenues at federally-recognized banks, presenting major concerns as to how
  these funds would be secured, transported or otherwise handled.
- There are no provisions about who would handle the disposal of controlled substance waste and contaminated or excess marijuana, and how.
- The Department is not aware of any laboratories, personnel and/or resources in Hawaii capable of analyzing the THC potency of marijuana or manufactured marijuana products, in a manner and magnitude necessary for adequate law enforcement.

Given the numerous and very serious risks raised by H.B. 312, H.D. 1—and the potential lack of demand for medical marijuana dispensaries, with only 318 patients reportedly unable to grow their own medical marijuana—the Department strongly believes that a system of this nature is simply not necessary in Hawaii. The dispensary system proposed by H.B. 312, H.D. 1, fails to account for the major concerns noted in the Department's testimony, and presents very serious and imminent risks to public safety. Rather than rushing into a quagmire that has not been duly examined, the Department feels very strongly that Hawaii must learn from the hard-learned lessons of Colorado, and approach the concept of a medical marijuana dispensary system with utmost restraint, thorough consideration, and comprehensive standards, controls and mechanisms to regulate the flow of marijuana through these businesses and into the public. For all of its improvements, H.B. 321, H.D. 1, simply does not do this.

For all the foregoing reasons, the Department of the Prosecuting Attorney of the City and County of Honolulu strongly opposes the passage of H.B. 312, H.D. 1. Thank you for the opportunity to testify on this matter.

<sup>&</sup>lt;sup>i</sup> Colorado Department of Public Health and Environment, Monitoring Health Concerns Related to Marijuana in Colorado: 2014: Changes in Marijuana Use Patterns, Systematic Literature Review, and Possible Marijuana-Related Health Effects, Jan. 30, 2015, at 170, available at

https://www.colorado.gov/pacific/sites/default/files/DC\_MJ-Monitoring-Health-Concerns-Related-to-Marijuana-in-CO-2014.pdf.

ii *Id*, at 162.

#### finance8-Melanie

From: mailinglist@capitol.hawaii.gov
Sent: Friday, February 27, 2015 11:32 AM

To: FINTestimony

Cc: loisjyoung@gmail.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM



## **HB321**

Submitted on: 2/27/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Lois J Young	Individual	Oppose	No

Comments: Dear Sirs: As a private citizen, business owner and community organizer, I oppose this bill as it decriminalizes marijuana which is a gateway drug to other drugs and law enforcement will be even more taxed trying to enforce sellers to comply with who they sell to. It is a known fact that medical marijuana retailers in LA have sold to underage students. We are opening a can of worms and there must be another way to afford those who need it. Sincerely, Lois Young Wahiawa

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

#### POLICE DEPARTMENT

# CITY AND COUNTY OF HONOLULU

801 SOUTH BERETANIA STREET · HONOLULU, HAWAII 96813 TELEPHONE: (808) 529-3111 · INTERNET: www.honolulupd.org

KIRK CALDWELL MAYOR TO THE MENT

LOUIS M. KEALOHA CHIEF

DAVE M. KAJIHIRO MARIE A. McCAULEY DEPUTY CHIEFS

OUR REFERENCE JK-TA

February 27, 2015



The Honorable Sylvia Luke, Chair and Members Committee on Finance House of Representatives Hawaii State Capitol 415 South Beretania Street Honolulu, Hawaii 96813

Dear Chairs Luke and Members:

SUBJECT: House Bill No. 321, H.D. 1, Relating to Medical Marijuana

I am Jerry Inouye, Major of the Narcotics/Vice Division of the Honolulu Police Department, City and County of Honolulu.

The Honolulu Police Department opposes House Bill No. 321, H.D. 1, Relating to Medical Marijuana. This bill seeks to establish a regulated statewide dispensary system for medical marijuana.

Part II, Subsection 321-M, appears to preserve qualifying the patients' rights to cultivate an adequate supply of marijuana pursuant to Part IX of Chapter 329. This subsection makes it difficult to regulate compliance with the law regarding limits of the amount of marijuana the patient can possess, particularly in cases where patients grow their own marijuana and obtain it from a dispensary.

The bill sets limitations on manufactured marijuana products by equating the product with the physical weight of the marijuana used to manufacture it. It is not adequate to use weight as the sole measurement as different strains of marijuana can have widely raging Tetrahydrocannabinol (THC) levels.

The Honorable Sylvia Luke, Chair and Members
Committee on Finance
Page 2
February 27, 2015

The Honolulu Police Department sympathizes with those who have serious illnesses and benefit from using medical marijuana. However, this bill as written would be virtually impossible for law enforcement to regulate and could easily lead to the diversion of large quantities of marijuana for illegal use and distribution. In addition, with the alternative forms of marijuana being proposed, there will be an increased chance of accidental ingestion by children.

The Honolulu Police Department urges you to oppose House Bill No. 321, H.D. 1, Relating to Medical Marijuana.

Sincerely,

Jerry nouye, Major Narcotics/Vice Division

APPROVED:

Louis M. Kealoha

Chief of Police

# finance8-Melanie

From: mailinglist@capitol.hawaii.gov
Sent: Friday, February 27, 2015 3:00 PM

To: FINTestimony

Cc: lesliehawaii@gmail.com

Subject: \*Submitted testimony for HB321 on Feb 27, 2015 15:00PM\*

## **HB321**

Submitted on: 2/27/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308



Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Leslie J.	Individual	Oppose	No

#### Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

#### finance8-Melanie

From: mailinglist@capitol.hawaii.gov
Sent: Friday, February 27, 2015 3:49 PM

To: FINTestimony

Cc: hadermand001@hawaii.rr.com

Subject: Submitted testimony for HB321 on Feb 27, 2015 15:00PM



#### **HB321**

Submitted on: 2/27/2015

Testimony for FIN on Feb 27, 2015 15:00PM in Conference Room 308

Submitted By	Organization	<b>Testifier Position</b>	Present at Hearing
Derek Wayne Haderman	Individual	Comments Only	No

Comments: I am having problems withthis but have extensive experience with growing, dispenseries a brother in Wash. State and a mothe in Ca. I don't think I will be heard do to Tech. difficulties...if you want my info it must be CONFIDENTIAL because the criminals will come and rob me. Derek 739 0008

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